



Dr. Benjamin Hewitt
Orthopaedic Surgeon



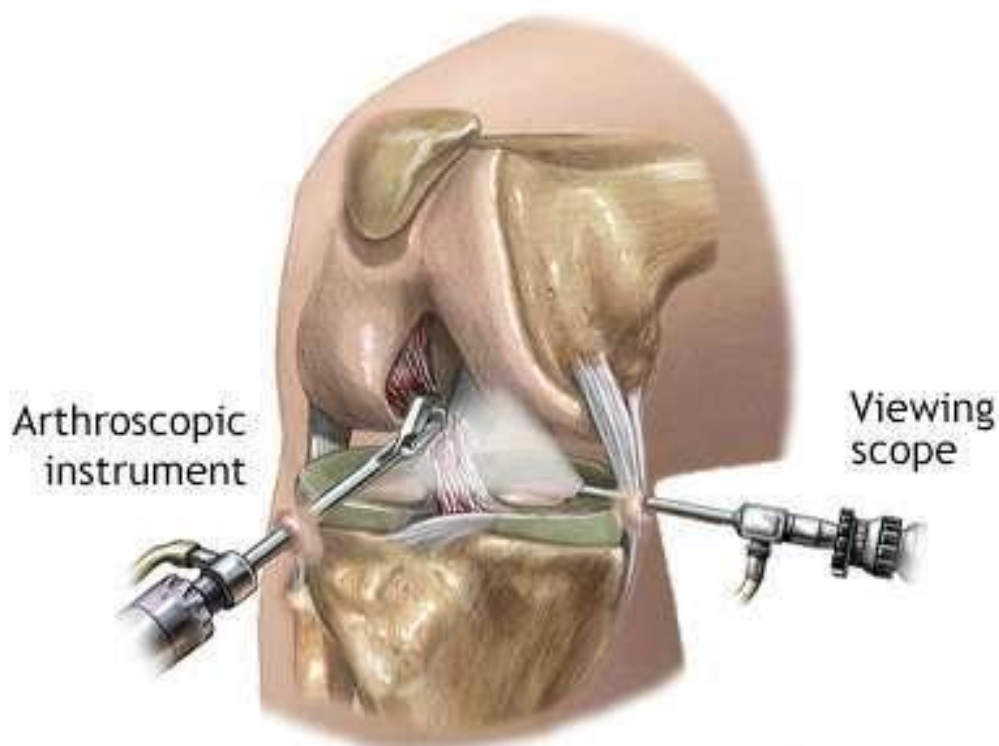
Knee Arthroscopy

Arthroscopic surgery is a technique used to inspect the knee joint cavity to diagnose, assess and possibly treat any damage. It involves the use of a small fibre-optic telescope, video equipment and small instruments. Simple procedures such as the trimming of a torn meniscus, debridement of an arthritic joint or removal of loose fragments are possible.

The Procedure

The surgery is usually performed as a day case under general anaesthetic.

Two or three small puncture holes are made in the skin to allow passage of the scope and instruments into the joint. These cuts are small enough to not require sutures and usually heal within 1 week.



Meniscal Tears

Meniscal tears are often treated by arthroscopic surgery. Menisci are usually torn by a twisting injury and unless the tear is very small they rarely heal by themselves.

Torn pieces or menisci may lock or jam in the joint and as well as being painful may cause further damage.

In most situations the torn piece of meniscus is removed but in young people with certain types of tears it is sometimes possible to repair the meniscus.



Risks

As with any surgery knee arthroscopy is associated with a number of possible complications, all of which are relatively uncommon :

- Infection : Rare < 0.5%. If it occurs may be serious and require further surgery.
- Bleeding or bruising around the portals or into the knee.
- Stiffness : usually temporary.
- Blood clots : life threatening clots are rare approx 0.1%
- Numbness of skin near portals is common but usually transient.
- Injury to major vessels or nerves is extremely rare but possible.

In general the risk of major problems is below 1 %

Blood clots :

Blood clots are a rare complication following arthroscopic knee surgery. They are more common in certain population groups. AS part of your preoperative consultation Dr Hewitt will assess your risk of blood clots and may recommend further precautions following your surgery eg. Clexane or compression stockings.

Results

The results of surgery depend on the degree of damage to the knee. Generally arthroscopy is excellent at removing mechanical blocks in the joint, severely arthritic knees often only gain temporary relief.

Post operative rehabilitation

Day 1 : Most patients are able to go home same day
Rest with leg elevated
Ice pack for 20 mins / hour will help with swelling
Take pain medication as needed
Keep knee dry
Straight leg raises and knee bending exercises
Weight bear as pain permits

Day 2 : Gradually increase exercises

Day 4 : Take outer layer of dressing off

Day 5 : Take last dressings off
Keep wounds clean and dry.

Day 10 –14 : Post operative review by Dr Hewitt

Physiotherapy

Some patients may benefit from physiotherapy. Some exercises will be prescribed. It is important to not overdo these as the knee does need time to recover from the surgery.

Return to activity

This depends on the damage found within the knee, the surgery performed and the fitness of the patient.

Driving : When the knee feels comfortable usually 1-2 days.

Office based work : 2-3 days.

Physical work : 3-6 weeks

Light training : 3 weeks

If it hurts or swells then you are doing too much.

This protocol applies to most cases , some variations will occur depending on the injury and surgery. If you have any questions about the surgery or rehabilitation don't hesitate to ask Dr Hewitt.

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