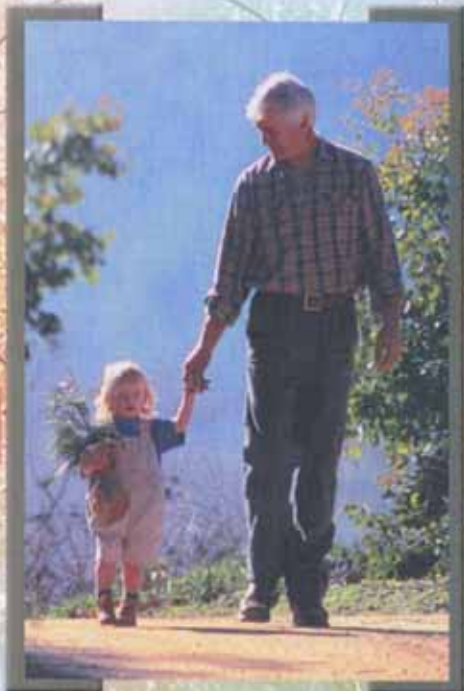


Knee Replacement



ORTHOPAEDIC
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Excelling in Hip & Knee Replacement
at Battle Creek Health System

What is knee replacement?

It is a metal and plastic covering for raw, arthritic bone ends. It replaces cartilage that has worn away over the years. Knee replacement can help relieve pain and get you back to enjoying normal, everyday activities. For those who have become bow-legged or knock-kneed over the years, it can also straighten the legs into a more natural position.

Who should have a knee replacement?

When severe pain limits your everyday activities such as walking, going up and down stairs and getting in and out of chairs, you may want to consider knee replacement surgery. Other reasons you may benefit from surgery is if you have moderate or severe knee pain while resting, either day or night, swelling of the knee that does not improve with rest or medication, bowing in or out of your knee, or the inability to bend and straighten your knee.

Is there an alternative to replacement?

Knee replacement surgery may be recommended after careful diagnosis of your joint problem. Other treatment options including medications, injections, physical therapy, or other types of surgery may be discussed and considered.

Should my knee be cemented?

Knee replacements can be successfully performed with all cemented components as well as with a combination of uncemented and cemented components. Your surgeon will discuss which technique is appropriate for you.

How long is the hospital stay?

The typical hospital stay after knee replacement surgery is three to four days. Walking and knee movement are important to your recovery and will begin the day after surgery. It is important to begin moving after surgery to get your blood flowing. This helps prevent blood clots and swelling from forming in your legs, which can occur from lack of activity.

Knee replacement surgery involves removing or resurfacing parts of your thighbone, shinbone or kneecap, and putting in a prosthesis made of metal and plastic.



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How long is recuperation?

Recovery varies with each person. It is essential that you follow your orthopedic surgeon's instructions regarding home care during the first few weeks after surgery, especially the exercise program you are prescribed. You'll most likely need crutches or a walker for three to six weeks, and then a cane for another three to six weeks. Many individuals are able to resume most normal light activities of daily living, including driving, within three to six weeks following surgery. Some discomfort with activity, and at night, is common for several weeks. Complete recovery can take from about three to six months.

While most people will gradually increase activities that may include recreational walking and biking, swimming, golf, and ballroom dancing, you will be advised to avoid more active sports such as jogging, tennis, high impact aerobics, skiing, repetitive lifting exceeding 50 lbs and contact sports.

If you are a patient who lives alone, you may require a short stay in a rehabilitation center for a few days after you leave the hospital. This will depend on how you progress in the hospital. Keep in mind that healing and recovery times vary with each person.

Will I need a blood transfusion?

The need for blood transfusions after knee replacement surgery depends greatly on individualized factors. Many people will not require a transfusion, while those that do usually have low blood counts to start with. If your blood

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What is the success rate?

Knee replacement is one of the most important orthopedic surgical advances of this century. Each year, more than 450,000 Americans undergo knee replacement surgery that often helps them get back on their feet and resume active lifestyles.

Are there complications?

As with any surgery, there is a risk of complications after knee replacement surgery. However, they are relatively rare. Blood clots are the most common complication after surgery. Your orthopedic surgeon may prescribe one or more measures to prevent blood clots from forming in your leg veins, such as special support hose, inflatable leg coverings and blood thinners. You may also receive antibiotics to help prevent infection.

Other complications include implant loosening, fractures, and nerve or blood vessel damage. Your surgeon will be taking great care to reduce the risk of these and other complications.

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Will I need a blood transfusion?

If your blood counts are high, it is much less likely that you will need a transfusion. Your blood count will be checked before surgery and while you are in the hospital. Blood transfusions are usually recommended if your blood counts get low enough to potentially put strain on your heart.

What about pain?

Thanks to advances in medication technology, we are able to keep you relatively comfortable after surgery.

How can I learn more?

You can reserve a space at one of our upcoming knee and hip pain seminars. Call today for more information.

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