

MAINE MEDICAL PARTNERS – ORTHOPEDICS

Division of Joint Replacements

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INFORMATION FOR PATIENTS CONSIDERING TOTAL KNEE REPLACEMENT

You have seen a surgeon and are considering total knee replacement surgery. Total knee replacement surgery is performed to relieve pain and increase mobility of the knee joint. Hopefully, this handout will answer some of your questions and increase your understanding of the procedure. It is not meant to replace talking with your surgeon or asking any questions.

Before Surgery

Total knee surgery is major surgery and requires careful preparation to get the best result. Prior to your surgery, you will be asked to do several things.

- You will be asked to visit your dentist (if you have teeth) as cavities or gum disease can be a source of infection that can travel to the knee during or after surgery, creating major problems. A visit to your dentist could prevent this. You should have been seen within 6 months of your surgery.
- You will be asked to see your regular doctor or perhaps a specialist for evaluation to ensure you can tolerate the surgery well.
- You will be asked to get some preoperative lab work done at Brighton Medical Center and meet with a health care provider to discuss options for anesthesia.
- You will be asked to come into the office approximately two weeks before the surgery for a history and physical examination and some preoperative x-rays. This will also allow you to have any additional questions answered. Any medications that you take will be reviewed at that time. You will also be informed if any of those medications need to be stopped or changed prior to surgery.
- You will be asked to wash your body with antibacterial soap each of the three nights prior to surgery.
- You may be asked to take special pain control medicines prior to surgery.

Procedure

Total knee arthroplasty, sometimes known as total knee replacement, involves the cutting and resurfacing of bone from the end of the femur (thigh bone) and replacement with a metal implant. The top of the tibia (shin bone) is also cut and resurfaced and then replaced with a metal and plastic component. The kneecap (patella) is also resurfaced. This procedure generally takes about two hours in the operating room. It is done under general anesthesia with a pre-operative nerve block to help with post-operative comfort. During the procedure a tourniquet is usually used to minimize blood loss.

As with any surgery, there are inherent risks with this procedure. The major risks for this procedure are the risks associated with anesthesia, risk of infection, risk of stiffness, risk of fracture, risk of phlebitis or blood clots in the legs. Even with a well-functioning joint, pain can be present after surgery.

In the long run, there is a risk that you will need re-operation, or that the wear particles that accumulate at the joint surface can cause bone softening (osteolysis). Prosthesis or bone fracture, loosening, and infection can also happen months or years after surgery. The joint is mechanical and will wear out over time.

There are limitations after the surgery that will protect the knee. Running and impact activities are not recommended after knee replacement surgery.

After Surgery

After surgery you can expect to have some pain (everyone's pain tolerance varies) and you will be given pain medication to control this. You will also be given antibiotics during surgery to prevent infections. Patients are also placed on a blood-thinning agent to prevent blood clots.

Most patients having a total knee replacement are in the hospital for a 2-day pathway stay. If you live alone and have no one to help you at home, you will go to a rehab facility until you become more independent. We like our patients to be able to safely get in and out of bed, climb stairs, and walk with crutches or a walker before being discharged from the hospital. While in the hospital you can expect to have physical therapy daily by a trained therapist. You can expect to get out of bed to a chair the day after surgery and walk with the therapist. You may need to continue using a walker or crutches for up to six weeks following your surgery. Immediately after surgery you will still have the intravenous lines in your arm that were started before surgery. These will be discontinued as soon as you are taking food and fluids well and are no longer requiring any intravenous medications. You will wear graduated compression stockings (TED hose) as well as Venodyne (venous pump stockings) while in the hospital. You will continue wear the TED hose at home until the swelling in the operative leg is diminished.

After Discharge

After leaving the hospital you will be full weight bearing walking on crutches or a walker . Physical therapy is necessary at your home for at least two weeks, and then at a facility near your home for two to three weeks until you can bend (flex) your knee 110-115°.

It is usually recommended that patients undergoing knee replacement surgery do not drive for four to six weeks after surgery because of muscle weakness and slow reaction time. It is also wise to avoid situations where you might fall, be jostled, or otherwise injure your knee.

As mentioned above, dental infections or bad teeth can be a source of infection for a total knee even after the surgery is completed. For this reason, it is wise to advise your dentist that you have had a total knee replacement surgery. For any dental procedures, including cleaning of your teeth, you should have some antibiotics for two years after your surgery. This is generally a dose one hour before dental procedures. Other infections in the body, such as boils or bacterial infection, could also represent a source of problems for a person with total knee surgery. For this reason, if you have any infection you should consult your family doctor promptly so that proper treatment can be carried out. You should not go to the dentist for three months after surgery unless it is an emergency, as this could increase the risk of infection.

You should not leave for a long trip away from home until six weeks after surgery. This is to have you near in case of any complications after surgery.

Expectations

Total knee replacement surgery is major surgery and should not be undertaken lightly. It is wise to keep in mind when considering this surgery that even the best total knee replacement is not as good as your knee was when it was healthy. The goal of the surgery is to relieve your pain, if not totally, then at least somewhat. It is also the goal with this surgery that you will maintain reasonable stability and flexibility as well.

Even when you feel much better you must keep in mind that this metal and plastic knee is a mechanical device. Just like any mechanical device, including your automobile, there can be problems or failures. The prosthesis does make a clicking sound and this is normal. This is the metal hitting the plastic. Notify your physician if you notice any unusual noise. In general, total knee replacements last approximately ten years in 90% of patients. As with any medical procedure, there is no guarantee.

Even if you feel much better following your surgery it is wise that you avoid activities which cause marked flexion of the knee, high impact to the knee, or any extreme twisting motions. It is advised that you walk with a cane until you can walk without a limp.

If you have any further questions, please feel free to call the office at (207) 781-1551.