

Orthopaedic Connection

Knee Bursitis

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Transforming patient information into patient understanding.

Everybody knows the term bursitis, but do you really know what it is?

A bursa is a fluid filled sac that is nestled between bone and the overlying soft tissue. It provides protection and cushioning. If a bursa becomes irritated its little lining cells produce fluid causing the sac to swell. This swelling can put pressure on adjacent tissue causing irritation leading to, guess..... right! Bursitis.

In the knee there are two common places where this happens.

- Between the skin and the bone of the kneecap (patella)
- Just below the knee joint on the inner (medial) side

Prepatellar Bursitis

In kneecap prepatellar bursitis the fluid filled bursa forms a dome-shaped swelling on top of the kneecap. It can reach a large size that patients describe as an egg.

It has been called “housemaid’s knee” because it can be caused by pressure from constant kneeling. Carpet installers, plumbers, and gardeners are susceptible. The condition can also be caused by a blow to the knee during contact sports, especially football, baseball and basketball. Rheumatoid arthritis and gout patients are at risk too.

Pes Anserine Bursitis

Goosefoot (pes anserine) bursitis is caused by irritation of the bursa located between the upper shin bone (tibia) and three hamstring tendons. The three tendons on the front of the tibia resemble a goose foot, hence the nickname.

This type of bursitis is common in people with osteoarthritis and those who are runners.

Symptoms

- Prepatellar bursitis – rapid swelling on the front of the kneecap and pain with activity.
- Pain at night
- Knee is tender and warm to touch

- Pes Anserine Bursitis – pain develops slowly on inside of knee 2 inches below the joint.
- Pain worse to climb stairs
- Pain worse to exercise

How To Treat It

- If the bursa isn’t infected, you can probably treat it effectively yourself.
- Treatment the same for both
- Stop activity that may have caused it
- Ice applied for fifteen minutes three times a day
- Ibuprofen to decrease inflammation and pain

Call Me If –

- It doesn't improve in two days

I will -

- Examine the knee and x-ray it to rule out a stress fracture
- I often aspirate the bursa
- Inject a steroid to decrease inflammation
- Sometimes remove the bursa surgically

Prevention

- Wear knee pads if working on knees a lot
- Switch to other activities at times when kneeling
- Runners, do hamstring stretches
- Avoid hill running

Gratiot County Herald Archive and Office Website.

I sincerely appreciate all of you loyal readers and patients present and future and welcome all newcomers!

Besides what you read today there is a huge treasure trove of Orthopaedic and musculoskeletal information at www.orthopodsurgeon.com. It contains the Website Library, Your Orthopaedic Connection and complete archive of every GCH article I have written.

I specialize in you. Be well.

Dr. Haverbush