

Orthopaedic Connection

What If I Told You.....

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Transforming patient information into patient understanding.

There are a lot of things I want you to know which don't deserve a whole article. They also aren't "Myth Busters" so I can't use that. So, here we go. Ready?

A Total Knee Only For Women

It is also referred to as a "gender specific" Total Knee Replacement. Do you need a woman's Total Knee? No. Why? While there are small differences in the shape of the joint, the differences are not clinically significant. Studies in small women who have had a woman's Total Knee on one side and a standard total on the other have shown no difference between the two.

The basic facts are when I do a total knee replacement I need to choose the right size prosthesis for that person and I must get it placed in proper alignment. Then after proper rehab the replacement has a great possibility of lasting as long as the patient lives.

Bone Scan Or Bone Density Test

They are completely different. A bone density test (DXA) is ordered to check for possible osteoporosis. It is done primarily on women, but I occasionally need to order one on a man too.

It usually is not done more often than every two years. Bone Density Tests can be done at the hospital or in the medical office.

A Bone Scan is a study done in the x-ray department of a hospital. It requires injection of a radioisotope. I may order a Bone Scan if I am looking for a stress fracture or possibly an infection in the bone. Bone Scans are also used to search for cancer that may be present in the body which has spread to the bone.

Steroid Injections In The Back May Cause Bone Fractures

Studies have begun to show that those epidural steroid injections for back pain that everybody is having can cause problems (besides the infection scare!). Bone fractures in the spine can occur later in patients who have had epidural injections. The risk increases if you are older and have osteoporosis.

Usually the injections are given in a series of three. If three didn't cause a lasting benefit, I have known of the series being repeated in the future.

Apart from the fracture risk, the patients I see in the office who have had epidural injections haven't improved a lot in most cases. I don't do epidural injections, but they certainly are frequently performed these days.

Coumadin (Warfarin) And Other Meds

Many patients are taking Coumadin for a wide variety of reasons. Most patients taking it should already know that certain medications taken for arthritis can increase the anticoagulant effect of Coumadin. Motrin, Aspirin, Aleve are no-no's.

So patients are often taking Tylenol for arthritis pain which is considered "*safer*" than the others. Tylenol can also sometimes cause bleeding if taken for more than a few days and if taken in too high a dose. It's hard to give exact amounts that are "too much", but just know that Tylenol can sometimes cause problems if you are on Coumadin. Drug reactions with Coumadin can be dangerous.

Arthritis And Alcohol

I know what you are thinking. More bad news right? You can relax! Alcohol consumption is generally not considered a risk factor for developing osteoarthritis. Alcohol can trigger a gouty arthritis attack if you have high uric acid. Alcohol and fractures certainly go together. I see that combination way too much, but increased chance of arthritis? Nope. Cheers!

See you next week. Keep reading, O.K. I want you all to be as smart as a tree full of owls.

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Dr. Haverbush