

## **Orthopaedic Connection**

### **“You Have Knee Arthritis” (Gulp! Now What?)**

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#### ***Transforming patient information into patient understanding.***

The title of this week’s article is not what you wanted to hear when you came to see me. You have been putting it off hoping the pain would go away, but it didn’t and so here you sit wondering – Now what?

Your pain is definitely a problem and your active lifestyle is slipping away. At this point it doesn’t make a lot of difference how you got where you are. The three primary causes of knee arthritis that I see are injury (one event or repetitive), carrying excessive weight and genetics (inheriting it from grandma or some other relative).

#### **Now What?**

The first thing that I need to do is to be sure what type of arthritis you have. In class some time ago you learned that there are 100 different kinds of arthritis. But realistically osteoarthritis is the most common form.

All of my patients are different. In their degree of arthritis, how they experience pain, what their expectations are. In other words I take a more patient oriented approach.

Many physicians including me are concerned about the toxicity of drugs in people with osteoarthritis who also have other conditions. The huge increase of patients taking Vicodin, Norco, Percocet and Oxycontin is alarming because they are so addicting especially in patients with chronic pain.

#### **Top Treatments**

Building muscle and losing excessive weight are at the top of guidelines of the American Academy of Orthopaedic Surgeons and American College of Rheumatology.

***These are the only two things that research as ever shown to affect the downward course of knee osteoarthritis.***

***The focus has to be to take the load off of the arthritic joint by weight loss and muscle strengthening.***

1. Weight loss. I can “hear” all of you thinking “there he goes again”. But the facts are there and can’t be denied. Even losing ten pounds can make a difference in knee pain. A by product too is less weight makes it easier to move and exercise.
2. Strengthen Weakened Muscles. The second and equally important treatment is to strengthen weakened muscles in your legs.

Anyone who has knee arthritis has weakness in muscles above the knee. This is true in almost every case. Arthritis causes changes in your gait (“favoring the affected leg”). Gradually strength is lost. Decreased activity leads to weaker muscles. Ability to do more exercise helps with weight loss.

#### **Where To Start**

Weight Loss. I advise my patients to get some help with this. Relieving stress on your joints is serious business. You have to do it right and keep the weight off so seek help from Weight Watchers or a similar successful program and keep at it. It does no good to lose 10 pounds and then gain it back.

It looks like I am out of space so I want to continue next week. Please return for Part II of “You Have Knee Arthritis”. There is lots more to learn. See you then.

**Office Website and Gratiot County Herald Archive**

What if there was a whole world of musculoskeletal information at one place? There is!

[www.orthopodsurgeon.com](http://www.orthopodsurgeon.com) opens up for you the office Website, Your Orthopaedic Connection and the Archive of all previous GCH articles I have written for you, your family and friends.

Please check it out. Do yourself a favor.

Be well.

Dr. Haverbush