

## **Orthopaedic Connection**

### **“Did You Know”.....**

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*Transforming patient information into patient understanding.*

#### **Older Patients Improve Balance with Total Knee Replacement**

For my older total knee replacement patients I was pleased to learn recently that I may be doing more than relieving their pain.

A new knee joint has a major affect to improve a patient’s balance. In a large recent study a large number of patients studied showed major improvement also in balance.

I always close articles with the statement “Our goal is simple – to help people return to more pain free functional lives.” Well, I would say improvement in balance is a BIG functional improvement.

When I do a total knee replacement and the patient has less pain that is not the only benefit. Everybody knows that balance and increased risk of falls are common in older patients.

It’s nice to know that pain can be in most cases eliminated and balance greatly improved by a total knee replacement.

#### **Viscosupplementation in the Shoulder?**

Viscosupplementation is the medical term for joint lubrication. As most of my readers (who are as smart as a tree full of owls!) know, I have done joint lubrication injections in the knee for a long time.

The procedure currently is approved by the FDA only for knee injections. Insurances don’t cover it if it is used in other joints.

Nevertheless several studies have found that it is as safe and effective as it is in the knee. This has been my experience also. It has been used in the shoulder and the hip in Europe for many years. There are some drawbacks, however. Injections into the shoulder joint and hip joint are technically different.

It is not just “a shot”.

It is extremely important that I verify that the injection of the Supartz lubrication medication has been placed within the joint.

As mentioned your insurance is not going to cover it if used in the hip or shoulder.

#### **Bilateral Total Knee Replacement**

I often see patients who have arthritis in both knees which is equally painful and both knees need total knee replacement. Almost always the patient chooses which knee to have operated first and does not insist on having both knees done at the same time.

While it is surgically possible to operate on both knees at the same surgery the final decision usually is based on the health status of the patient.

The ideal patient is younger, in good physical health with no cardiac, pulmonary or vascular disease.

Pro: You only have one surgical event with a single anesthesia.

Con: Early rehabilitation is “a bear” and there is a slightly higher risk of cardiac problems.

Tie: Overall risk of infection, blood clots, or death is about the same i.e. extremely low.

*My patients put their trust in me and what I do improves the quality of their lives.*

Wow! Your window to the Orthopaedic and musculoskeletal world opens at [www.orthopodsurgeon.com](http://www.orthopodsurgeon.com). It contains 1) The Website Library of Information 2) Your Orthopaedic Connection 3) GCH Archive of all previous articles.

You will be amazed at all the helpful information it contains.

All of the information pertains to everything I treat in the office and hospital.

Be well. Good health, good life, all the best to you.

Dr. Haverbush