

Orthopaedic Connection

Don't Call It "Chicken Shots"

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Transforming patient information into patient understanding.

Shall we continue our short course about the elegant sounding Viscosupplementation or as most of my patients refer to it as "those chicken shots"? Why in the world do patients refer to the program as "chicken shots"? Read on.

Last week I talked a lot about joint fluid also called medically, synovial joint fluid.

A major component of synovial joint fluid is a natural body chemical termed hyaluronic acid. Your body's own HA is a wonderful lubricant and shock absorber.

The Chicken Connection

As it turns out the HA in your body is almost exactly the same substance that is found in the comb of a rooster! Yep. Many patients say it is very hard to believe. That is, a substance in a rooster can be the same chemical substance as in a human. Mystifying, but completely true. I think that is an example of the beauty of medical research. There are innumerable examples of substances from plants and animals that we benefit from, HA being one.

How Does It Work?

It works way differently than other forms of treatment for osteoarthritis of the knee.

For one it is not a "pain killer". It is not a narcotic or a steroid.

Very little of the hyaluronic acid that is injected into the knee gets out into the body. It is also known that HA apparently is metabolized and doesn't stay around very long.

Then what does it do to help your body make its own better joint fluid for a long period of time?

When I figure it out, I'll send you a post card from Sweden where I will pick up my Nobel Prize in Medicine! Seriously though we just don't know.

Is It For Me?

Well, it depends. I usually reserve it for my patients who have not responded to other treatment options. There are many choices on the menu (as I like to refer to it) for treatment of osteoarthritis of the knee. It is pretty hard to put a time frame on how long other options should be used.

I do feel strongly about one aspect. Viscosupplementation medication is available to any physician to use in the office. However, I feel only Orthopaedic Surgeons are the doctors who can decide which patients may benefit from it. That is a very key point.

Orthopaedic Surgeons are very good at injecting the knee joint, which can be difficult in many patients. The injection MUST be given into the knee joint space or it can't possibly help the patient. Close is no good.

I mostly reserve the injection for patients who have moderate arthritis symptoms of pain, stiffness and decreasing function. Many patients do not feel that they are ready for a total knee replacement or cannot have surgery because of other medical conditions.

They would like to hurt less and be able to do more.

In our next and final (I promise) class on knee joint lubrication I will explain how I do the injection in the office and what works for my patients.

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

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