

What To DO - And Not Do, To Treat Knee Arthritis

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Transforming patient information into patient understanding.

What I will be telling you about today comes straight from the American Academy of Orthopaedic Surgeons. The knee arthritis "guidelines" were published in February 2009 by the Academy. I have been a member of the Academy for many years. It is the largest and most prestigious Orthopaedic Surgery organization in the world. As members we look to it as our professional information and teaching source. When the Academy says something we listen very attentively.

What The Academy Said

Key Recommendations

For people with knee arthritis, regular exercise is a priority. Specifically strengthening exercise for thigh muscles, low impact aerobic exercise and flexibility exercise. (We are lucky because all of this is available at the Lakeview Community Wellness Center!).

Weight Loss is equally important to exercise. There just is no getting away from it.

Pain relief

Tylenol, but not more than four grams a day.
Advil or Motrin. Coated if you have stomach problems.
Topical gels or creams. Voltaren, Theragesic, etc.
Glucosamine/Chondroitin such as Osteo-Bi-Flex might be helpful.

Viscosupplementation

Or as I call it, a pain relieving lubrication injection. I use Supartz in a five injection program. There are others. Supartz has worked best for my patients.

A Cane

Absolutely. It can help greatly, used in the opposite hand; if you're not too proud to use it.

Arthroscopic Surgery

Uh. Maybe. But not just because you have arthritis. I will do it if I think you have a torn cartilage or loose pieces in

addition to the arthritis. In that case, I can help you by doing an arthroscopy.

Orthotics

Again, maybe. Everyone with knee arthritis doesn't need orthotics. You may need orthotics if I determine you have a certain foot type or some condition in your foot that is affecting your body mechanics.

A Knee Sleeve or Brace

No harm in trying, but they usually don't help much and my patients get tired of wearing them.

Steroid Injection

I give them at times for pain relief, but they don't cure the arthritis and I can't predict how long it will help you. Injections do have a place, however.

Total Knee Replacement

The most complicated form of treatment. It has to be matched to the right person. Most of the patients I see want to at least try some other forms of treatment before committing to a total knee. I will not pressure you to have a total knee just because I can do the surgery. That is wrong.

It is a process. For some nothing short of a total knee will help. I don't make those patients go through all the other stuff. I like to work out with the individual patient what is best for them. It might come down to a total knee or on the other hand they may never end up having one. We will together work out what's best for you.

Merry Christmas. Happy New Year to all of our Lakeview Area News readers. I hope you have learned a lot this year. It is my privilege to take care of many of you and a privilege to write these articles to help readers and their families be more knowledgeable about their health.

I am happy to see all orthopaedic problems at the Lakeview Community Wellness Center in Lakeview or at the office in Alma at 315 Warwick Dr., Alma, Michigan.

Please call 989-463-6092 for information or to schedule an appointment.

Future Lakeview Community Wellness Center Clinic dates are January 8, January 15 and January 29, 2010.

Our goal is simple - To help people return to more pain free functional lives.

Good health. Good life. All the best to you.

Be well.

Dr. Haverbush