

# Argus Orthopaedic Zone

## Knee Pain: How I Treat It.

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

There are many causes for knee pain that I see in the office. It goes from muscle pain, ligament strain or overuse all the way to severe arthritis.

### **Correct Diagnosis**

As I have told you many times in other articles proper treatment can only be done when the diagnosis is correct. Since there are many causes I have to unravel the mystery so to speak. Knee pain can be very easy or very hard to diagnose.

- Detailed history
- Careful exam of knee (but hip, ankle and sometimes back too!)
- Plain x-rays which are done standing
- Maybe other special imaging studies if I need them. Often I don't.

### **Age Related**

To a large extent what I do for treatment is determined by the person's age. I will focus on treatment of knee pain in patients over 40 for today's discussion.

Except for specific injuries that can damage the knee, most patients over 40 tell me that the pain "just came on several months ago". It's hard for most people to give a specific cause.

Changes in the knee's joint surface are most often the cause. The previous very slippery joint surface has begun to erode. Chondromalacia to put a medical word on it. It is an early stage of arthritis.

### **Direction of Treatment**

After the accurate diagnosis of the knee pain has been made several options of treatment are considered.

- If no treatment has occurred so far I would in most cases suggest Advil or similar anti-inflammatory medication.
- Tylenol helps pain, but not inflammation
- I often prescribe Celebrex if a prescription arthritis medication is needed.
- Sometimes Theragesic or Ben Gay will help.

### **Injections**

- I use Celestone or Kenalog if I feel a cortisone preparation will help.

- If I am dealing with a somewhat more advanced arthritis change I might use the Supartz pain relieving lubrication series in 5 injections.

### **Exercise**

Strengthening the thigh muscles above the knee can be very helpful in decreasing stress on the knee and relieving pain. Proper instruction for doing this is needed.

### **Surgery**

I have very few patients coming to the office insisting on surgery for their knee pain. I realize this and try other options first.

If it does begin to appear surgery is needed, there are often several choices.

In speaking to patients and families about this I like to present the menu so to speak. Everyone appreciates being informed about their choices. I take the time needed to do this for each patient.

I have a lot to say about the several types of surgery for the knee. We are out of time this week, but next time I will cover thoroughly what each type of surgery can do. Please come back to learn more about treatment of knee pain.

### **Office Website and Argus Orthopaedic Zone Archive**

What if I told you all the Orthopaedic and Musculoskeletal information you need is in one place?

The place is online at [www.orthopodsurgeon.com](http://www.orthopodsurgeon.com).

It contains

- The Office Website Library Of Articles
- Your Orthopaedic Connection
- Argus Orthopaedic Zone Archive Of All Previous Articles

That is a huge amount of information that can be very useful to you, your family and friends. Please check all of this out and you will be amazed.

It is a wealth of information about all the things I treat in the office and hospital.

I specialize in you.

Our goal is simple - To help people return to more pain free, functional lives. Call if you need me.

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

Be well.

Dr. Haverbush