

Argus Orthopaedic Zone

Knee Pain: Non-Surgery Options

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Transforming patient information into patient understanding.

As an Orthopaedic Surgeon it would be wrong for me to present surgery as the only way to treat bad knees. Unfortunately some do that. I can't help what others do, but I can be honest and correct in what I tell you.

Do I perform a lot of knee surgery? Yes, when it is needed.

Well then what else is on the menu as I like to say to patients regarding their treatment options.

- **Shed pounds**

Wait, don't stop reading and roll your eyes thinking I knew he was going to say that. I do realize how hard it is to lose weight. But, we're not talking about huge amounts of weight. Please at least read the rest of the next paragraph!

Key point – Lose 10 pounds and it relieves 40 pounds of pressure on the knees. Proven over and over biomechanically. Losing 15 pounds can reduce your knee pain by half. Many patients who had been planning surgery didn't have it after losing 10 – 15 pounds. Don't get discouraged. You can do it and your knees will thank you.

- **Get Moving or Keep Moving**

The right kind of activity will not make your knee arthritis worse. Walking, riding a bike and swimming reduce stiffness and improve strength and flexibility. In arthritis it is important to maintain or increase strength and range of motion. If you don't do something you definitely will lose strength and become more stiff. Take Advil (or similar) if you need to and get going.

- **A cane**

It is the knee arthritis patient's friend. Don't be too proud. It can do wonders. Get one and keep walking. Do it for you not me.

- **Physical Therapy**

Maybe. It has to be prescribed of course. You can't walk into a Physical Therapy office or department and say you want some "therapy". Physical Therapy can help some patients and I do prescribe it based on physical exam and x-rays. PT always includes a lot of homework exercises that the therapist gives you. So in time you are finished with therapy and doing all of the exercise program at home.

- **Viscosupplementation**

A technical word that means injecting a pain relieving substance into the knee in a series of 5 shots to relieve pain and stiffness. One called Supartz has worked the best for me in properly selected patients.

- **Cortisone like shot**
“Cortisone”, the grandfather medication got a bad name because it was over used. The more modern, refined cortisone (steroid) preparations (I use Celestone) can be very effective if used carefully and not too often.
- **Tylenol**
Only for the pain. It has no anti-inflammatory effect.
- **Advil, Motrin, Aleve, Naproxen**
These are perhaps a better choice for a lot of patients since you get pain relief and some anti-inflammatory effect.
- **Conclusion**
We’re not through the menu yet, but we are out of space. If you will promise to come back next week I will tell you of more non-surgery options. See you then.

Office Website and Argus Orthopaedic Zone Archive

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 Argus article I have written.

I specialize in you. Be well.

Dr. Haverbush