

## Ending Arthritic Pain – Surgery is an Effective Last Resort for Hips and Knees

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Arthritis of the weight-bearing joints is a progressive process. Your symptoms may wax and wane for years, but your physical limitations will continue to progress as you age.

If nonoperative treatment modalities for hip and knee arthritis are no longer adequate, surgical options may come up for consideration. These options vary depending on the joint involved.

### For the Hip

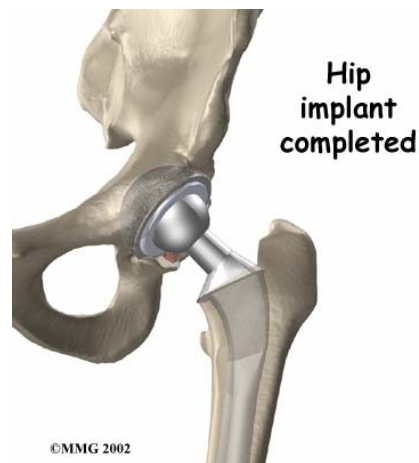
When hip pain from arthritis becomes highly disruptive to the quality of life, a hip replacement typically becomes an option. Many different types of hip replacements are available. They all involve removal of arthritic cartilage on both sides of the joint and replacement with a metallic or plastic component. Several advancements in surgical techniques and implant materials have occurred over the last several years. Surgical techniques have become less invasive to surrounding tissues, which offers the potential advantage of accelerated recovery.

New Mexico Orthopaedics uses the term “potential” because the medical literature remains controversial on this point and generally has not demonstrated such an advantage. We attempt to use the smallest possible incision that allows adequate exposure to perform a successful and — we hope — long-lasting hip replacement. We also made changes in our postoperative pain-management protocol to allow patients a more comfortable first few days after surgery.

With regard to advances in hip replacement devices used, the general trend in the United States is to use cementless fixation on patients with adequate bone quality. The hope is that providing a “biologic fixation” (bony ingrowth into the parts) will produce longer-lasting bond results than cement. Clearly, some patients are better served by cementation of the components, but they are becoming less common as the indications for cementless fixation expand.

In addition to advances in fixation, advancements in bearing surfaces are encouraging. Polyethylene wear is what limits the longevity of hip replacements in most cases. There have been tremendous advancements in the quality of polyethylene, allowing longer expected service duration for hip replacements. Other types of bearing surfaces also have emerged, such as ceramic-on-ceramic and metal-on-metal surfaces. These implants are worth discussing with a physician.

The hope is that the combination of improved fixation techniques and bearing surfaces enables creating a longer-lasting, successful hip replacement for patients who have exhausted nonoperative options.



## For the Knee

The surgical treatment options for knee arthritis are a bit more varied than for hip arthritis. Alternatives can include arthroscopy, osteotomy, partial knee replacement, and total knee replacement. As the symptoms and disability progress, some form of replacement is generally indicated. It is worthwhile to ask a physician about these options.

As in hip replacement, there have been advancements including surgical techniques, prostheses that accommodate more flexion, gender-specific designs, and newer polyethylene options.

Surgery is the last resort for patients with advanced arthritis. However, surgical solutions are often effective options for those who are disabled by arthritic pain.

