

Total Knee Replacement

Frequently Asked Questions

What is a knee replacement?

A knee replacement is an elective surgery, replacing the bottom end of the femur and the top end of the tibia with a man made device (prosthesis). The back surface of the patella is also commonly resurfaced.

What are the benefits of a total knee replacement?

The goal of any form of knee replacement is to decrease pain, and allow routine activities to be performed with less difficulty. More than 90 percent of individuals who undergo knee replacement surgery experience a dramatic reduction of knee pain and a significant improvement in the ability to perform common activities of daily living.

Following surgery, some types of activity will need to be avoided for life, including jogging and high impact sports. With normal use and activity, every knee replacement develops some wear in its plastic cushion.

What is the prosthesis made of?

These devices are combinations of metal and plastic and

sometimes ceramic materials.

What is used to attach it to my bones?

They are fixed to the bone either using bone cement or by using a prosthesis with a rough surface, which relies on your bone growing on to the implant for long term stability. It may be reinforced with screws on the tibial side. In between the two components is a special plastic liner made out of polyethylene.

Who is offered total knee replacement as an option?

When you have arthritis on your X-ray and pain and stiffness from your knee joint cause:

- Severe disability
- Difficulty or inability to perform your job
- Interference with your leisure activities
- Interference with your walking or mobility
- Difficulty putting on shoes and socks
- Waking you at night

Or when conservative treatment such as analgesia, anti-inflammatories, weight loss, physiotherapy and aids like crutches or a cane has failed.

Remember that it is an elective procedure and should only be performed when you are no longer prepared to put up with your pain and disability and understand the benefits versus the risks.

Is the procedure safe?

Knee replacement procedures are now a very commonly performed procedure and advancements continue to be made.

However, there are risks in any operation. You can read about the general complications here. Some complications specific to total knee replacement are:

- Infection

- Fracture
- Stiffness
- Damage to nerves or blood vessels
- Blood clots
- Wound irritation or breakdown
- Wear
- Osteolysis
- Damage to ligaments
- Dislocation
- Heterotopic ossification
- Cosmetic appearance
- Leg length inequality
- Breakage of the implant

When can I go back to work?

Most patients return to sedentary jobs at 3-6 months after total knee replacement. It must be stressed to the patient before surgery that they may not return to manual labour after joint replacement. Any heavy manual job will result in premature loosening of the joint replacement and pain due to the increased stress on the joint replacement. Clerical or supervisory duties are suitable for a patient with a total knee replacement.

When will I be able to drive again?

When you feel comfortable using your leg fully. For most people, they feel comfortable driving after six weeks. Please also

check with your insurance company as they may have specific rules on when you can drive after surgery.

When will I be able to resume sexual intercourse?

Sexual intercourse is allowed when the patient is comfortable but they have to be in charge of the positions used and any significant discomfort should result in the patient abstaining until they talk to their doctor.

When will I be able to play sports?

When your pain is well controlled and you have good muscle control. Obviously, pounding sports are not good for joint replacement as they can wear the articulation. We recommend walking, bushwalking, swimming, stationary bike riding, doubles tennis and skiing on groomed runs if the patient is already a good skier. Jogging and heavy weights, although possible, will wear the joint prematurely.