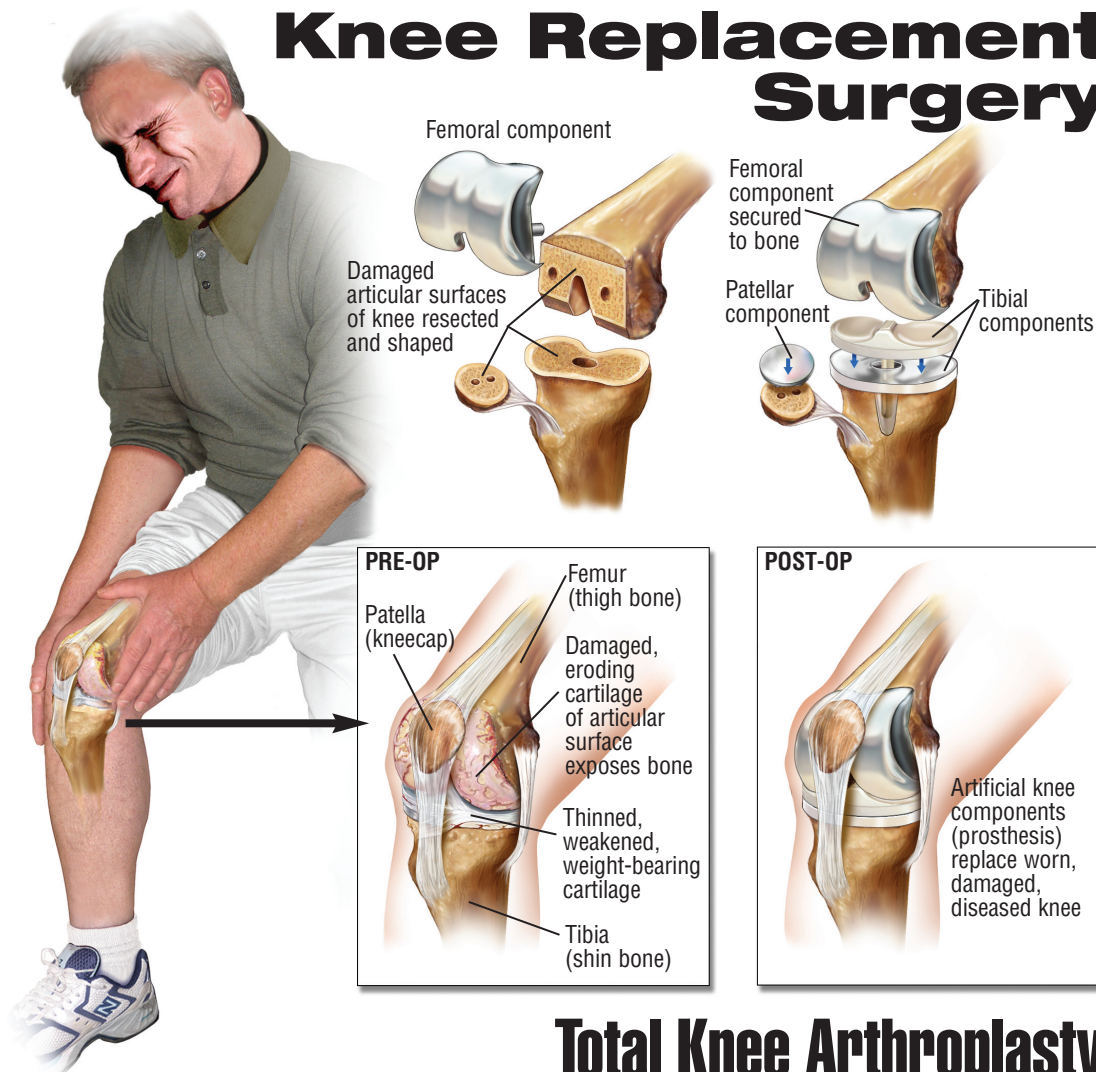


PATIENT TEACHING AID

Knee Replacement Surgery



Total Knee Arthroplasty

Surgery to repair an injured or diseased knee joint is known as total knee replacement or total knee arthroplasty. During this procedure, an 8- to 12-inch incision is made in the front of the knee, the destroyed bone and cartilage in the knee joint are removed, and an artificial joint made of metal and plastic is implanted to restore the knee's normal function.

The knee joint is made up of three bones: the thigh bone, the shin bone, and the kneecap. These bones are covered by cartilage, which cushions the bones and allows them to move easily. Synovial fluid lubricates the cartilage and eliminates friction. Large ligaments connect the thigh bone to the shin bone. In a knee joint with osteoarthritis, the cartilage is worn away, leaving the bones to rub against each other when the knee is flexed. If the knee is affected by rheumatoid arthritis, there may be too much synovial fluid in the joint, leading to inflammation and cartilage damage. A knee injury can cause tears in the ligaments that hold the large bones together, damaging the articular cartilage. Any of these conditions can lead to disability, pain, and ultimately the need to replace the knee joint with an artificial joint.

Patients and their orthopedic surgeons decide together when a knee joint needs to be replaced. The classic symptoms of pain and stiffness when walking, climbing stairs, or even at rest signal the need for surgery when conservative treatment fails. Knee replacement surgery has become increasingly sophisticated since its development in the late 1960s. In addition, the design of and materials used for artificial knee joints have advanced considerably. In the vast majority of patients, surgery confers increased mobility and significant pain relief. If the patient adheres to standard guidelines for permitted activity, artificial knee joints should last 20 or more years.

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