

Orthopaedics – your questions answered

Consultants from The London Clinic orthopaedic department answer some common questions about bones and joints

HIP

Q My mother has been advised that she needs a hip replacement and is very worried about having the operation. What will the surgery involve and how long will it take her to recover?

A Hip replacements are often necessary for patients with advanced arthritis and are now extremely advanced, substantially improving the patient's quality of life post-surgery. The surgery involves removing the damaged bone at the top of the thigh and creating a channel in the thigh bone. A stem is then placed in this channel and a hard ball is attached. This is matched to a cup which is inserted into the natural socket, from which the damaged bone will have been cleared. The operating time for this surgery is on average 90 minutes but this does vary according to the extent of the arthritic damage. It's usually followed by a five day stay in hospital.

During this period, with the help of a physiotherapist, your mother will be mobilised with crutches and guided in exercises which she should do regularly to help her regain muscle strength. Generally this continues for about six weeks after the operation, after which the majority of the recovery is complete. After these six weeks, the major risk of dislocation should have passed and she should be much more relaxed about her activities in general and able to abandon her crutches.

Mr Gareth Scott,
Consultant Orthopaedic Surgeon

HIP

Q I have been advised that I need arthroscopic hip surgery due to a sports injury. What does this surgery involve and how long is the recovery time?

A This is a relatively new area of hip surgery and is used at The London Clinic to treat the condition, femoroacetabular impingement. This condition used to be routinely treated through open surgery, followed by several days stay in hospital. Arthroscopic hip surgery involves a new keyhole technique that uses small incisions and a camera to help visualize the inside of a joint. It is much less invasive and only requires one day's stay in hospital. Recovery is much easier and patients return to an active lifestyle relatively quickly.

As this condition particularly affects young people playing sports, the new treatment has a very large and positive impact in terms of their ability to return to sport much sooner.

Mr Johan Witt,
Consultant Orthopaedic Surgeon

SPORTS INJURY

Q What is the best way to limit my risk of developing a sports injury?

A If you regularly play sport the most important measures to take are:

- Maintain flexibility* - a warm up is essential. Cold muscles are more prone to injury
- Maintain control* – Proprioception control (balance) is essential following even the smallest injury
- Rest periods* - must be part of regular training. Fatigue or overuse are key risk factors for injury

Mr Peter Rosenfeld,
Consultant Orthopaedic Surgeon

SPORTS INJURY

Q What are the latest treatments available for specific sports injuries?

A Keyhole surgery in ankle and cartilage transplants are the newest treatments available at The London Clinic. Mosaicplasty or cartilage transplant is a recent development for treating severe cartilage injuries to the ankle. This involves borrowing a cylinder of cartilage and underlying bone from the knee and transferring it into the ankle. Ankle arthroscopy or keyhole surgery is a relatively new use of arthroscopy and a wide variety of ankle conditions can now be treated with minor surgery and rapid recovery. Both of these procedures produce excellent results when treating cartilage defects of the ankle.

Mr Peter Rosenfeld,
Consultant Orthopaedic Surgeon

SPORTS INJURY

Q What are the most common sports injuries?

A Ankle sprains are the most common sports injury and can result in chronic problems in up to a third of all cases. There may be damage to the joint cartilage, ligaments or tendons. Also, there may be chronic inflammation and thickening of the ruptured ligament with internal scarring. In football and other impact sports, ligament and cartilage injuries are more common. In sports which involve significant flexibility such as gymnastics, athletics and dancing, tendon injuries and dislocations are more common, particularly around the back of the ankle.

For ankle injuries it is important that the ankle is fully assessed by an expert as there are several rare injuries which may lead to problems later on in life.

A simple sprain should settle over six weeks and early physiotherapy is very important for a rapid recovery. In severe sprains, the symptoms may last for several months.

In chronic cases, a MRI, ultrasound or CT scan will be needed to confirm the diagnosis. These problems can be successfully treated with ankle arthroscopy (keyhole surgery). This is a relatively minor procedure performed as a daycase.

*Mr Peter Rosenfeld,
Consultant Orthopaedic Surgeon*

KNEE

Q I am due to have what the consultant calls 'a bone conserving joint replacement of the knee'. What is this and how is this different to a normal knee replacement?

A There is now a growing understanding that early minimal intervention in knee replacement can be beneficial in preventing or reducing the incidence of severe disease requiring more aggressive surgery later on. Patients are presenting much sooner with knee pain following arthritis and the general feeling is that we must move towards a culture of early intervention and bone conservation.

Patients with isolated arthritis perform far better if only the affected part of the joint is replaced. Partial joint replacements have improved considerably in recent years and at The London Clinic we believe in highly accurate, precise implantations to achieve our goal of longevity of these replacements.

I believe that precise, accurate alignment can only be achieved utilising computer assisted and robotic techniques. These allow us to accurately plan the operation pre and post-surgery and execute surgical plans with far greater precision.

*Mr Dinesh Nathwani,
Consultant Orthopaedic Surgeon*

WRIST

Q I have been suffering from wrist pain for the last few months. I cannot recall a specific injury. What could be the cause and how is this treated?

A There are a number of causes for persistent wrist pain. Occasionally fractures and ligament disruptions are overlooked as 'wrist sprains' and if left untreated can lead to degenerative problems, causing chronic wrist pain and increasing stiffness. These injuries are common in young active individuals. Indeed, often the wrist may only begin to hurt many years after the original injury.

Many of these conditions can often be diagnosed with MRI scanning and treated with arthroscopic keyhole surgery. There are a number of other conditions that can cause chronic wrist pain, such as Kienbock's disease and degenerative or rheumatoid arthritis. There are now new surgical techniques to treat arthritis of the wrist including wrist replacement surgery.

*Mr Elliot Sorene,
Consultant Orthopaedic Hand
and Upper Limb Surgeon*

KNEE

Q I have heard of computer assisted knee surgery. How does this work and what does the surgery involve?

A Computer assisted knee surgery has developed in recent years to improve the level of accuracy with which orthopaedic surgeons can execute surgical procedures. The computer acts merely as a guidance for the surgeon and does not actually perform the surgery itself. The X-ray results from knee replacements using this technology show incredible accuracy.

Also being developed is the use of robot assisted surgery where the computer sets constraints to the degree of bone cuts pre-determined by the surgeon. This avoids damage to the underlying structures within the joint. The aim of any knee reconstruction is to accurately align and restore the patient's own joint line. New technology, such as The Acrobot Navigator™ – a state-of-the-art robot that uses a Global Positioning System (GPS) type technology – helps improve this accuracy with pinpoint precision.

*Mr Dinesh Nathwani,
Consultant Orthopaedic Surgeon*

The London Clinic Clinic is located on Harley Street, in the heart of the capital's medical community, and is internationally renowned for its medical and surgical expertise.

If you would like to put any alternative questions to our orthopaedic consultants, please contact:
The London Clinic Press Office on **020 8786 3860**
or email: pressoffice@thelondonclinic.co.uk

For more information please visit thelondonclinic.co.uk