MENISCAL TEAR

What is the Meniscus?

The meniscus is the half-moon or crescent shaped cushion in the knee made of cartilage, a very tough but elastic material. The medial meniscus is located on the inner side of the knee and the lateral meniscus is located on the outer side of the knee. They function primarily as shock absorbers within the knee.

Meniscal tears are the most common knee injuries seen and treated by orthopaedic specialists. Anyone at any age can tear a meniscus. In younger individuals, tears typically result from a fall or twist of the knee during sports. By the age of 40, the meniscus has lost about half of its elasticity resulting in the cartilage becoming weak and thin over time, leading to degenerative tears.

Conservative Treatment

Many meniscus tears can be treated conservatively with rest, ice, activity modification, physical therapy, and NSAIDs. There are also regenerative therapy options that your physician may recommend. Meniscus tears can cause pain, swelling, and mechanical (catching) symptoms in the knee. These symptoms may resolve with conservative treatment, but continued mechanical symptoms may warrant surgical intervention.

Surgery

Meniscal surgery is typically performed as an outpatient procedure under arthroscopic (camera) guidance. The knee is filled with fluid providing a clear view of the entire knee. Small surgical instruments are then inserted through the incisions of the knee and then used to trim, or in some cases, repair the torn meniscus.

Risks of Surgery

The risks of surgery are very small given the minimally invasive nature of the procedure. The major risks include bleeding and infection. The surgery is typically performed under a general anesthetic. Your anesthesiologist will discuss the details of the recommended anesthetic.

Postoperative

You will receive specific instructions from the hospital or surgery center upon discharge.

 After a routine knee arthroscopy most patients utilize crutches for anywhere between 1 and 3 days. If additional surgery was performed, such as a meniscus

- or cartilage repair, restrictions will be given prior to discharge after surgery. It is very important to minimize the amount of standing and walking for at least 72 hours after surgery to minimize the amount of swelling that may occur.
- Your first postoperative visit will occur approximately 10 days after surgery. Here, your surgery photos will be discussed, sutures will be removed and physical therapy ordered if needed. It is important at this visit to discuss whether any employment paperwork is needed.

Rehabilitation

Most patients with sedentary desk type jobs can be expected to return to work between 1 and 2 weeks. Weight-bearing and motion are allowed immediately unless otherwise instructed. Patients can begin to run and jump approximately 6 weeks after surgery. Full and complete recovery can take upwards of 3 months.

Outcome

Arthroscopic surgery for meniscus tears is very successful. However, the results are largely based upon the tear size and how much meniscus is removed. Larger tears in the setting of moderate arthritis will have less successful outcomes than very small tears in an otherwise normal knee.



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