



28 Years of Orthopaedic Experience - Facts and Fallacies

-Dr. John F. Irving-

As I approach 30 years of Orthopaedic Surgery practice, dedicated to hip and knee replacement in arthritic patients, it is interesting to reflect on some headline news articles offering the latest and greatest improvements in orthopaedic and arthritis care. In this short space available, I will touch on a few issues that deserve special attention and a reality check about what works and what is hype. These items receive a lot of press, patients spend a lot of money on them and most are unproven treatments. Please refer to my website for a more thorough review and don't hesitate to ask questions on any of these subjects with any physician you see.

ANTERIOR HIP APPROACH and OUTPATIENT TOTAL HIP SURGERY

Anterior approach for total hip was developed and used by Dr. Kris Keggi 35 years ago. I have used it and variations (2-Incision) for almost 20 years. Patients were being discharged home the day after surgery 15 years ago! What is new and has changed is the pain medication protocol and anesthesia for the operation to make the procedure less painful and allow you to function independently and safely right away. Outpatient total hip is available to those patients wanting to go home the same day and is generally offered to younger, healthy and motivated patients. I have been offering this option since January 2015. Successful outpatient total hip experience relies on comprehensive post-operative pain control and home physical therapy arrangements. The most important advancement here is the realization and acceptance by patients and their families that you can go home the same day, walking with crutches and with minimal discomfort.

I had my left hip replaced in 2009 through an anterior approach and left the hospital the next day! It is not a new procedure!

CUSTOM TOTAL KNEE IMPLANTS

The biggest factor in recovery from knee replacement is, as in all operations, is the patient's post-operative biologic response to the surgery and **NOT THE IMPLANT CHOICE.**

This is called **INFLAMMATION**: swelling, stiffness, achiness and warmth. The second most important factor is the skill and the experience of the surgeon. There are **NO MEDICAL STUDIES** to show that the results (better motion, faster recovery, less pain) of so-called custom knee implants are better than the reliable implants, that have a



proven track record, we have used for decades! It can take a year to get over the inflammation after a total knee replacement. **To me, the most significant improvement in total knee implants for young and very active patients may be a newer design that preserves the Anterior Cruciate Ligament (ACL), that I use selectively: the Biomet XP® and Smith and Nephew XR.** These implants preserve all the ligaments in the knee and therefore, should be more stable during activity and feel more like your natural knee! These knees implants have been used for 2 years and early results are very positive.

I have had total knee replacements of both knees. One was done 10 years ago, the other 5 years ago. *I continue to maintain an active lifestyle!* The key for me was working hard to build up the muscles in my legs, especially my quadriceps thigh muscles. *Are the knees perfect?* No, they can ache after rigorous exercise or after a day standing up and operating, but they are so much better than the arthritic knees I had before the operations, and there is no activity I can't do... and these are NOT CUSTOM KNEES!

SUPPLEMENTS



These products offer no scientific results to substantiate the claims that they prevent or improve the course of arthritis. Therefore, as required by the FDA, they must say in commercials and on the bottle that "These products are not intended to diagnose, treat or cure any disease." Many people want to "try" all options before considering surgery which is okay if you don't mind spending the money, which can be a significant amount. Glucosamine and Chondroitin sulfate are in this category. They may not help you, but they won't hurt you, except in the pocketbook!



ARTHRITIS

Arthritis is a condition that develops over time and is related to genetics, childhood development, injuries and age. Carrying extra body weight will add extra stress to your joints. A patient with arthritis loses the cartilage cap on the bones at a joint. It is similar to a car tire going bald! The best way to minimize the risk and effects of arthritis are to stay active and fit and keep your weight under control. It is especially important to maintain the strength of your legs as you grow older.

This can be accomplished in the gym or with physical therapy. Keeping yourself in good physical health will help you maintain your independence, reduce the impairment of arthritis and minimize the risks of injurious falls later in life.

If you need a total hip or knee replacement, it is a great operation with tens of thousands of surgeries being performed in the US annually. The results are terrific. Complications are few. But remember, being artificial joints, they are good joints and not normal joints.

Dietary supplements send 23,000 people to EDs each year, study reveals

Read the ABC News Report:

<http://abcnews.go.com/GMA/video/health-alert-dietary-supplements-34490210>

Read the original research article from the New England Journal of Medicine:

<http://www.nejm.org/doi/full/10.1056/NEJMSa1504267>