

Identifying knee arthritis and treatments paths to feel better

By Dr. Jason Desmarais, Concord Orthopaedics



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Arthritis is another term for inflammation. This can happen in any joint in the body, but the knee is a particularly common place to develop arthritis. There are many types of arthritis but osteoarthritis (routine wear and tear) is the most common. This occurs when the cartilage is worn away. This can be caused by old traumatic injuries to the knee, or with typical wear and tear. The cartilage becomes thin (or completely gone), frayed and rough. Normal cartilage is a protective layer that prevents the ends of the bones from rubbing together. Without the cartilage, the bone ends grind and cause pain. The arthritis can cause bone spurs, swelling and pain.

What are the symptoms?

Knee arthritis typically presents as a dull pain in and around the knee. It can cause swelling, crepitus (crunching), stiffness and reduced mobility. Occasionally, knee arthritis can cause the knee to become bow legged or knock knee. The pain and discomfort can limit people's ability to exercise, do daily activities and enjoy life!

How is knee arthritis diagnosed?

Knee arthritis is diagnosed through a combination of the patient's description of their symptoms, a physical exam and x-rays. The x-rays can show that the space in the joint is narrowed-meaning that the cartilage is worn away. Occasionally, it is described as "bone on bone" arthritis. This means that there is no more cartilage left to lubricate the joint. Unfortunately, this is very common... but we do have ways to treat arthritis.

What are the treatments?

Similar to many aches and pains, we typically recommend non-surgical treatments to start. Activity modification, exercise, weight control and anti-inflammatory medications (Ibuprofen, Aleve) with acetaminophen (Tylenol) are the mainstays of arthritis treatment. Keeping a healthy weight and staying active will put less pressure and force across the knee joint. Exercise can also keep the knee joint moving which can limit how stiff the knee becomes. Tylenol is an excellent medication for pain when it

is taken in appropriate doses. Additionally, anti-inflammatory medications reduce pain and inflammation in the knee which will make it easier to stay active.

If knee arthritis continues to progress and become more painful, there are other nonsurgical options to consider. Injections (or shots) into the knee joint are commonly used to help with pain and inflammation. There are a variety of types of injections. Most commonly, cortisone (an anti-inflammatory medication) is used as the first medicine for a knee arthritis injection. This can provide pain relief for weeks or months. Unfortunately, the benefits of the injection are not permanent. Often times, injections are offered a few times in order to help ease patients' pain. Other options for injections are different collagen type gels. These include Synvisc, Euflexxa and Orthovisc. They are different types of hyaluronic acid that can at to lubricate a joint. *However, currently there is no medication or injection that can replace cartilage.*

If knee arthritis continues to cause pain and disability, patients may consider a total knee replacement (a.k.a. total knee arthroplasty). This is a surgery that removes the diseased cartilage from the knee and replaces it with a metal cap on the ends of the bones with a plastic insert that acts as a new cartilage. Knee replacement is one of the most commonly performed surgeries with almost 1 million patients in the US having one every year. The recovery after a knee replacement is challenging and can take up to 3 months. However, most people are very happy with their outcome and are living a more active lifestyle with less pain.

Do I need a knee replacement?

Knee replacement is an elective procedure that is an option for end stage knee arthritis. If you are having knee pain, stiffness or swelling, it might be worth having a visit with your doctors and consider having x-rays taken. My goal is to find out what patients' goals and expectations are and decide together what the best treatment is on an individual basis. I believe that shared decision making with patients is the best recipe for success.

Jason Desmarais, MD is a knee and hip surgeon at Concord Orthopaedics. Born in Concord and raised in Manchester, he is excited to return to his home state to help take care of the local communities. In his free time, Dr. Desmarais enjoys spending time with his wife and three young kids in addition to golfing, skiing and following New England sports teams.



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