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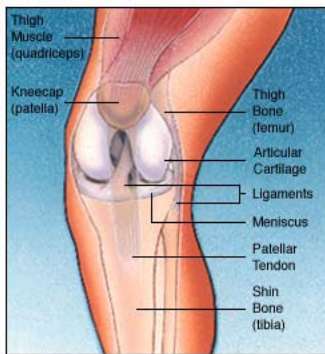
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## Total Joint Replacement

### What is total joint replacement?

An arthritic or damaged joint surface is removed and replaced with an artificial joint surface called a prosthesis. So, the total joint replacement would be appropriately termed a total joint surface replacement.

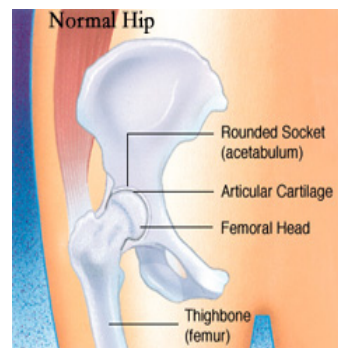
### What is a joint?



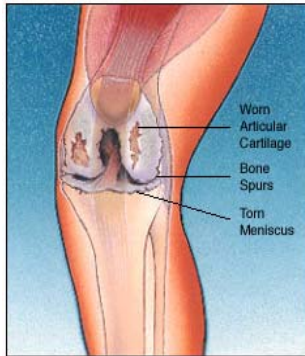
A joint is formed by the ends of two or more bones, which are connected by thick tissues. For example, your knee joint is formed by the lower leg bone, called the tibia or shinbone, and your thighbone, called the femur. Your hip is a ball and socket joint, formed by the upper end of the femur, the ball, and a part of the pelvis called the acetabulum, the socket.

The bone ends of a joint are covered with a smooth layer called cartilage. Normal cartilage allows nearly

frictionless and pain-free movement. However, when the cartilage is damaged or diseased by arthritis, joints become stiff and painful. Every joint is enclosed by a fibrous tissue envelope or a capsule with a smooth tissue lining called the synovium. The synovium produces fluid that reduces friction and wear in a joint.

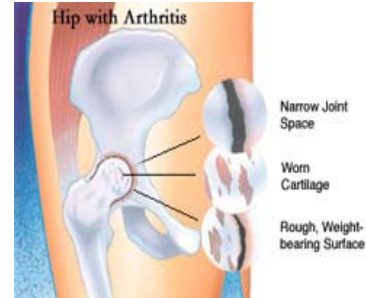


## Why is total joint replacement necessary?



Your pain may be so severe, you will avoid using the joint, weakening the muscles around the joint and making it even more difficult to move the joint. Sometimes a joint isn't painful but loses function with advanced arthritis. The goal is to relieve the pain caused by the damage done to the cartilage and improve function.

A physical examination, possibly some laboratory tests, and x-rays will show the extent of damage to the joint. Total joint replacement will be considered if other treatment options have failed to relieve your pain and disability.



## How is a total joint replacement performed?

A total joint replacement is actually a total *surface* replacement. Much like a dentist placing a crown on a tooth, the prosthesis is placed on the prepared ends of each bone in the joint. It is rare to replace more than just the surfaces. You will be given an anesthetic and the surgeon will replace the damaged parts of the joint. For example, in an arthritic knee the damaged ends of the bones and cartilage are replaced with metal and plastic surfaces that are shaped to restore knee movement and function. (See page 11 of the Total Knee Replacement pamphlet) In an arthritic hip, the damaged ball (the upper end of the femur) is replaced by a metal ball attached to a metal stem fitted into the femur, and a metal socket is implanted into the pelvis, replacing the damaged socket. (See page 11 of the Total Hip Replacement pamphlet)

There are several materials that can be used for the prosthesis. You and Dr. Menzner will discuss and determine which material will be most appropriate for your prosthesis, taking into consideration your age and activity level.

## What is the recovery process?

You should anticipate a hospital stay of two to three days. Some individuals may require an extended stay at a rehabilitation facility for up to three weeks. Your level of independence will determine this. This decision will involve you, Dr. Menzner, the hospital staff, and your insurance carrier

In general, your orthopedist will encourage you to use your "new" joint shortly after your operation. After total hip or knee replacement you will often stand and begin walking the day of surgery. Initially, you will walk with a walker, crutches or a cane.

Most patients have some temporary pain in the replaced joint because the surrounding muscles are weak from inactivity and the tissues are healing, but it will end in a few weeks or months.

Exercise is an important and essential part of the recovery process. Your orthopedic surgeon and staff will discuss an exercise program for you after surgery. These exercises differ according to the joint replaced. Your willingness to perform these routines will largely determine the success of your joint replacement.

After your surgery, you will be permitted to participate in activities such as: golf, walk, fish, hike, bowl and dance. In some cases you may even ski or jog.

The motion of your joint will generally improve after surgery. The extent of improvement will depend on how stiff your joint was before the surgery and your commitment to rehab and exercise.

## **Preparing for total joint replacement**

Before surgery, your orthopedic surgeon will make some recommendations, such as suggesting that you:

- stop taking certain medications before surgery
- begin exercises (stationary bike) to speed your recovery after surgery
- evaluate your plans for discharge from the hospital, which may include home therapy and rehabilitation after surgery
- arrange your home to enable safe mobility with a walker, crutches and/or a cane and eliminate potential obstacles (throw rugs, cords, etc.)
- if you have a two-level home, consider setting yourself up on one level and staying there after surgery.
- if you currently live alone or unassisted, make arrangements for someone to stay with you for at least a week after surgery.

## **Wound Care**

Taking care of your incision is of paramount importance. Preventing infection is the key here. Please keep your surgical wound clean and dry. Pets should not be allowed near it. Bandages are provided daily in the hospital and the nursing staff will instruct you how to apply new dressings at home. You should keep the incision covered with gauze and tape

until there is no longer any drainage (the bandage you just removed will be totally spotless). Keeping your incision dry is also a must. We ask for the first two weeks that, while showering, you cover your wound with a clear plastic wrap and tape (even saran wrap works well). Another aspect of wound care is keeping the swelling down by elevating your leg several times a day. If any signs of infection begin, please call us promptly. These signs would include but are not limited to: fever, chills, sweats; a red, hot and swollen knee; and certainly puss is a bad sign. Please do not apply creams, ointments, antibiotic solutions, etc to the incision. Small areas of concern can be dabbed with peroxide on gauze 2-3 times a day.

### **Is total joint replacement permanent?**

Older persons can expect their total joint replacement to last their lifetime. It will give years of pain-free living that would not have been possible otherwise. Younger joint replacement patients may need a second total joint replacement. Materials and surgical techniques are improving through the efforts of orthopedists working with engineers and other scientists. The future is bright for those who choose to have a total joint replacement to achieve an improved quality of life through greater independence and healthier pain-free activity.

Your orthopedist is a medical doctor with extensive training in the diagnosis and nonsurgical and surgical treatment of the musculoskeletal system, including bones, joints, ligaments, tendons, muscles, and nerves.

Portions of this brochure have been prepared by the American Academy of Orthopedic Surgeons and are intended to contain current information on the subject from recognized authorities.

If there are any urgent concerns or questions that you may have during the after clinic hours (after 5:00pm) or on weekends please call the office number (323-2600) and you will be given a number where you can reach the call in service who will then put you in touch with the doctor on call. Every attempt should be made to contact us during office hours to ensure prompt response and resolution