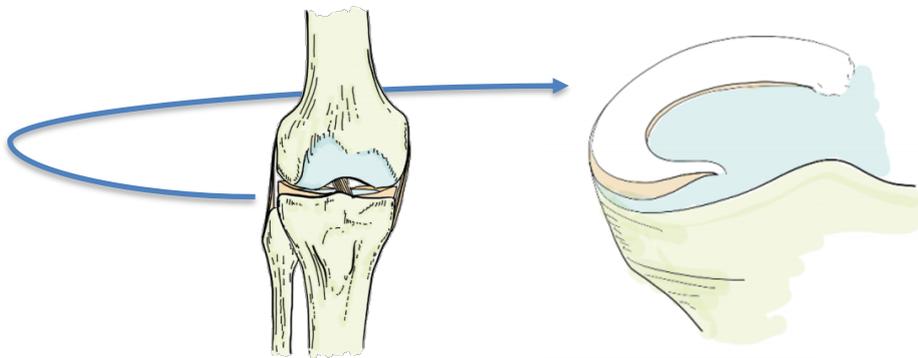


## Meniscal Injuries in the Knee

Injuries to the meniscus are common and can occur at any age. There are two menisci and they act as shock absorbers in the knee – damage to a meniscus can lead to problems within the knee and arthritis.

If the meniscus has been injured through wear and tear with arthritis also being present in the knee then it can be treated without surgery. Physiotherapy, activity modification and pain relief medications can help the symptoms.

Some tears can be serious and require surgery. People with significant tears may experience pain, inability to bend or straighten the knee, pain on walking and may have a limp.

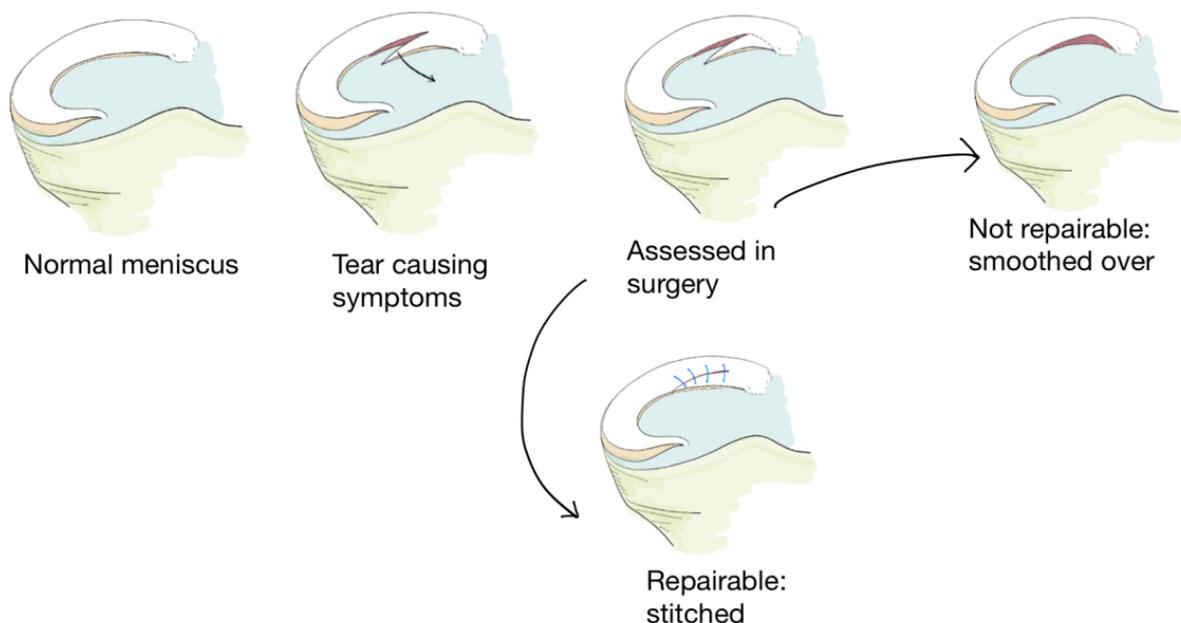


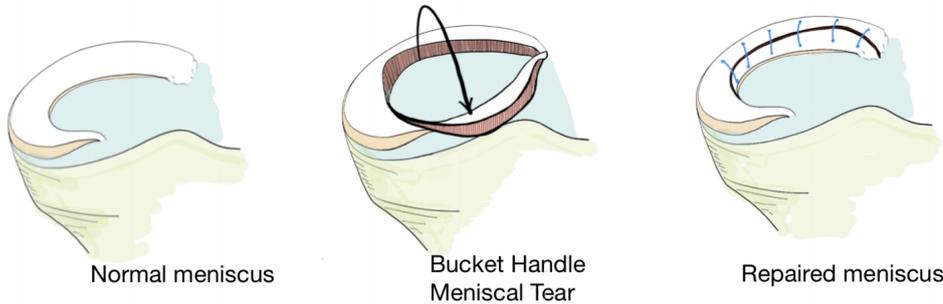
Normal Knee

Normal Meniscus

A tear in the meniscus may require surgery. Dr Stevens will assess the movement of the knee and will likely order an MRI scan if this hasn't been done already.

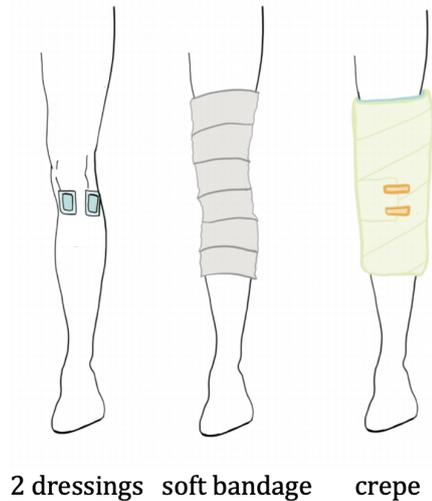
If the tear can be fixed then surgery to place sutures to hold the meniscus can be performed, usually through keyhole surgery. If the tear cannot be fixed then the torn portion of the meniscus is smoothed through keyhole surgery. Dr Stevens will discuss this with you.





After surgery, you may be able to begin to move the hip, ankle and knee under the instruction of Dr Stevens. Placing weight on the leg will depend on the type meniscal tear surgery you have had and how if the meniscus needed to be fixed. You may require a brace and physiotherapy for the knee once the wounds have healed.

A soft bandage and crepe will be placed over the leg following surgery. As the tissue and bone heal, a small amount of blood may appear on the dressings. This is normal. Sometimes, replacing the bandage is required to reinforce any areas that continue to bleed.



Elevate the leg for the first few days following surgery. You may be placed on blood thinning medications such as aspirin to help reduce the risk of clots.

**Discharge home:** After your surgery you will stay in hospital overnight and potentially for a few days. You will be discharged with pain relief tablets.

**Pain relief:** After surgery it is normal to have some pain or discomfort. The amount of surgery you have had will influence how much pain you can expect and how long you will need pain relief for. You will be given pain relief tablets to take home with you when you leave the hospital. Take these over the next week or so as you need.

**Looking after the Bandage:** You will need to keep the bandage clean and dry. The Crepe and Soft Bandage can come off when they get loose. You may want to re-wrap your knee and leg, otherwise you can discard these bandages. Keep the dressings that cover your wounds dry for the first 2 weeks.

**Movement after surgery:** You can move your foot, ankle, knee and hip straight away after surgery. Your knee will slowly be able to bend in the days that follow your operation. You may experience some knee pain in the weeks following surgery. You will need crutches or a frame to walk after surgery. Sometimes the knee may swell in the first 3 weeks. This is normal, but any redness, calf pain or sign of infection should be seen to by a doctor quickly.

It is a good idea to keep moving even after your surgery, it helps your blood circulation and stops your body getting too weak. Avoid any strenuous activity for the first 2 weeks, but gentle movement and walking with your crutches is advised.

When you are resting or sleeping try to keep the leg straight and elevated on some pillows.

**Wound review:**

After 2 weeks you will have an appointment with Dr Stevens to have your wound checked, any stitches will be removed. Dr Stevens will then give you advice on exercises and physiotherapy.

**Driving:** You cannot drive until you have had your first review appointment with Dr Stevens. He will give you an indication then when you are likely to be able to drive again

**Returning to work:** This depends on the type of surgery to the tibia you have had and the type of work you do. Most surgeries will need 2-6 weeks off work, some will require longer, especially if you have a manual job.

As with all surgery, there are risks with surgery of the meniscus. These include infection, delayed healing or wound problems. Difficulty with pain and range of movement may also occur. Arthritis of the knee may also occur as time goes on as a result of the injury. Sometimes, further surgery is required if more of the meniscus is damaged through injury.

- + Fever
- + Heavy bleeding or ooze from the wound
- + Increased swelling and redness around the surgery site
- + Pain in the calf muscles or difficulty breathing

If you have any of these problems, please call Dr Stevens or his rooms on **03 5752 5020**