

#### **Meniscus Tear Information Packet**

# What is the meniscus?

- The meniscus is a C-shaped piece of cartilage that acts as a shock absorber between the femur (thighbone) and tibia (shinbone) in the knee joint.
- An intact meniscus allows weight to be distributed more evenly across the knee joint.
- There are two menisci in each knee: the medial meniscus (on the inside) and the lateral meniscus (on the outside).

#### What is a meniscus tear?

- Meniscus tears can occur due to acute injuries, or during activities that involve twisting or rotating
  the knee. They can also result from normal aging, making the tissue more brittle and prone to
  tearing.
- A meniscus tear can lead to to pain, swelling, a feeling of catching or locking in the knee and limited range of motion.
- The meniscus does not heal on its own in the vast majority of cases.

### How does arthritis contribute to knee pain?

- Osteoarthritis is a degenerative joint disease that affects many adults. It involves the breakdown of joint cartilage and adjacent bone in the knees. Over time, the cartilage wears down, and in severe cases, bones will rub against each other, causing pain and limiting function.
- Pain from arthritis does not improve with meniscus surgery.

## How do we treat meniscus tears?

- Symptomatic treatment Using medicines, injections, braces and occasionally physical therapy we may be able to make patients feel better. This will improve symptoms but will not cause the meniscus to heal. This may be the best option for patients with significant arthritis and meniscus tears.
- Arthroscopic partial meniscectomy Most commonly, we use a minimally invasive surgical procedure
  that involves the removal of the damaged portion of the meniscus in the knee using an arthroscope
  (camera).
  - Outpatient procedure
  - You are able to put full weight on the leg immediately and may only need crutches for comfort for 1-2 days if at all.
  - Most patients see a therapist only 1-3 times
  - You may return to activites progressively over 4-6 weeks.
- Meniscus Repair In rare instances the meniscus can be repaired.
  - Outpatient procedure
  - Usually use a brace 4-6 weeks
  - Some versions of meniscus repair require patients to limit their weight bearing for a few weeks



Please scan the QR code to watch a video about meniscus tears or visit:
https://tinyurl.com/meniscus-tear

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# Post Surgery

• Your post-operative appointment will be scheduled 5-10 days post surgery with my PA Caroline McBane to check on your progress. If you do not have this appointment made at the time of your surgery please call the office and ask for an appointment at 336-375-2300.

#### Anesthesia

- You will be fully asleep for the entire procedure.
- For the vast majority of patients, anesthesia is very safe. There are specific risks with any anesthetic
  procedure and the anesthesiologist and nurse anesthesist will discuss these with you at the time of
  surgery.
- Your anesthesiologist will speak to you prior to the procedure to go over the pros and cons of your anesthesia options. Ultimately, the decisions about your anesthesia options are made by you.

# Pain control

- Pain after surgery is normal and is an expected part of recovery.
- We use a comprehensive and diverse approach is used to manage pain after surgery. This approach minimizes the the use of narcotics which can have harmful side effects and are addictive.
- Most patients go home with scheduled Acetaminophen (Tylenol), an anti-inflammatory (meloxicam, celebrex or ibuprofen) and a narcotic (tramadol or oxycodone). Most patients do not require narcotics and there is no medical indication to refill narcotics after surgery typically

# Risks of surgery

- This surgery, like all surgeries has potential risks. That said, the vast majority of patients have a good outcome.
- Some risks include infection, blood clots, stiffness and surgery related risks (post-meniscectomy syndrome, retear) and are rare.
- Pain from arthritis does not improve with meniscus surgery. Pain that may be because of normal wear and tear will continue after surgery.

For more information visit the patient information section at <u>drdaxvarkey.com</u> or scan below



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