ORTHOPEDICS CASE STUDY

Bilateral Gross Osteoarthritis Knees with Varus

Osteoarthritis is a condition also known as degenerative arthritis. Osteoarthritis occurs more frequently as we age. Osteoarthritis is characterized by the wearing out of the cartilage, between the bones of the joint. Loss of this cartilage causes friction between the joints and leads to pain, limitation of movement and severe deformities. In the long run such joints will need surgery termed as total knee replacement (TKR).

| Normal knee joint | Osteoarthetic knee joint |

Here at Sagar Hospitals, Dr. Khincha and his team have dedicated their expertise to provide a better quality of life as we age. Many of them have benefited from this surgery and have found immense joy and confidence to carry out their daily activities independently. The perfect result of medical science advancement and zeal to improve quality of life is the Total Knee Replacement surgery.

History

A fifty eight year old female patient approached us with Gross Varus Deformity at 30 degrees. She had pain in both knees and has been suffering for the past 8-10 years. The patient has much difficulty in walking, standing and climbing stairs. She has no previous history of Diabetes, Hypertension, Bronchial Asthma and Ischemic Heart Disease. She was referred to Sagar Hospitals- Ortho Dept., led by Dr. Khincha H.P.C

Diagnosis

The patient cannot stand straight due to age worn out bones. She was suffering from Osteoarthritis and thus experiencing severe pain, difficulty in walking, climbing stairs, wearing shoes, using Indian toilets, etc. This was leading to further deformity. In such extreme cases a Total Knee Replacement Surgery is the only solution.

Investigation

After complete assessment like complete blood test, urine test, bone density test, X-rays (chest, knee and spine), cardiac anesthetic assessment, general physician’s assessment, dental check-up, Doppler test, etc. An opinion was taken from each doctor, & then after final evaluation of entire tests by the main surgeon, the surgery date was fixed.
**Procedure**
Just prior to the surgery relevant investigations were done. The patient underwent bilateral total knee replacement PFC with external tibial rods and step wedge. Patient withstood the procedure well. Post procedure patient was stable at the time of discharge.

**Post operation**
Day 1: Physiotherapy was started within 4-6hrs of surgery, after assessing the patient’s parameters. Continuous Passive Motion (CPM) was used. Exercises & Cryotherapy (ice therapy) was started. Sufficient backup of antibiotics and pain killers were prescribed for the patient.

Day 2: Physiotherapy continued and the patient was made to sit sideways.

Day 3: Patient stood with a walker and was shifted to the ward. Physiotherapy continued with exercises, walking with walker in ward and she was also taught to climb the stairs.

Patient was discharged after confirming everything.

Post 15 days, the patient was called back for suture (stitch) removal. Home care physiotherapy was arranged for the patient with medications.

The patient is now able to walk without a walker, independently. She is also able to perform her daily chores with relative ease. She is not suffering from the acute pain in her knees anymore.