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Total knee replacements are one of the most successful procedures in all of medicine. According to the Agency for Healthcare Research and Quality, more than 600,000 knee replacements are performed each year in the United States.

Replacement Surgery Facts

Total joint replacement (TJR) is one of the most commonly performed, elective surgical procedures in the United States, and the volume of primary and revision TJR procedures has risen continuously in recent decades. A new study presented at the 2018 Annual Meeting of the American Academy of Orthopaedic Surgeons (AAOS) analyzed models to more accurately predict the future volume of TJA procedures in the United States. By 2030, primary THR (total hip replacement) is projected to grow 171 percent and primary TKR is projected to grow by up to 189 percent, for a projected 635,000 and 1.28 million procedures, respectively. Similar gains are expected for revision THR and TKR, growing by 142 percent (72,000 procedures) and 190 percent (120,000 procedures), respectively.

Don't Sell Yourself Short After Orthopedic Surgery

QUALITY OF LIFE FOR MANY is the determining factor why they opted for that knee, hip, shoulder reconstruction or replacement. Once a patient has made the decision to proceed with surgery, they need to remember that the physical therapy portion of their recovery is equally as important if not more.

The last thing you want to happen after going through the surgery is not having the full benefits of returning to activities that you previously enjoyed in life. Full range of motion, strength, and improved balance is the goal to begin to return to previous activity.

Strengthening exercises help you improve function and return to activity. The goal is to improve strength, increase endurance, and maintain or improve range of motion. Post-operatively, your physician works closely with the physical therapist

with a specific plan related to your reconstruction or replacement surgery.

Some individuals may require in-home physical therapy until moving to an out-patient physical therapy environment. Either way, it is important that patients engage as needed in the physical therapy plan outlined for them.

Your orthopedic surgeon and physical therapist will often recommend ice and heat. Both are useful protocols for warming up and cooling off muscles. They stimulate blood flow and decrease swelling. The key is understanding when to ice or heat.

Stimulating deep tissues within the body is another useful tool post-operatively. Ultrasound is sometimes used because of the high-frequency sound waves stimulating deep tissues warming and increasing blood flow.

Many patients benefit from electrical stimulation. This therapy passes an electrical current to the affected area. Post-operatively the muscles in the surgical area and nerve conduction can be altered. Electrical stimulation can improve muscle contractility increasing blood flow to the tissues and often decrease pain in the affected surgical region.

Each patient's physical therapy plan will vary depending on the surgical procedure, age, weight and their physical ability. Patients will need physical therapy two to three times a week for 4-6 weeks or more. The important aspect is to embrace the physical therapy through being compliant with the long-term goal of once again enjoying life to the fullest. 

Natalie Howard graduated with a Doctorate of Physical Therapy in December 2011 from Azusa Pacific University in Southern California. She has worked in outpatient physical therapy for eight years with both a large privately-owned company and with a physician-owned company. She holds certifications as a Credentialed Clinical Instructor and is the facility manager of a Lake Cook Orthopedics, a division of Illinois Bone & Joint Institute in the Northwest Suburbs of Chicago.