

# **MENISCAL REPAIR/MICROFRACTURE - POST OPERATIVE INSTRUCTION SHEET**

Dr Sam Chia MBBS (Sydney), FRACS (ortho), FAOrthA

## **Dressings**

Your wounds will be usually closed with dissolving stitches. These wounds are usually covered with a combination of mesh, glue and dressing. Covering all of this will be an outer compression bandage which should be removed the day after your surgery (this can be cut or unwrapped). Please keep the inner dressings dry and intact if possible - this may require a plastic bag or gladwrap in the shower. To minimize the risk of infection these dressings should not be changed unless compromised (some dried blood/ooze is normal but please contact the office if there is any fresh discharge).

## **Pain**

The level of pain after your surgery should be at the level of a moderate ache. This should be controlled with simple pain killers such as paracetamol and/or anti-inflammatory medication (e.g. Nurofen). Occasionally stronger pain killers such as Panadeine Forte/Endone are necessary but if these do not control your pain please contact the rooms (or the Emergency Department if severe).

## **Blood Clots**

While post surgical deep venous thrombosis (DVT) is rare, it is not clear whether blood thinners should be given routinely after meniscal repair/microfracture. My suggestion is, however, to take 300 mg aspirin (available from supermarket/chemist) daily for 6 weeks (unless there are any contra-indications to this).

## **Things To Watch Out For**

Meniscal repair/microfracture has a low complication rate but very occasionally swelling, infection or DVT can occur. Please seek medical care if you experience a sudden increase in pain (both in the calf and knee), shortness of breath, swelling, redness, fevers or discharge from the wound. During business hours please call the rooms on 1800553335 and after hours please call the Emergency Department of your local public hospital.

## **Physical Activity After Your Knee Arthroscopy**

### **1. Walking And Daily Activities**

You will usually need to wear a hinged knee brace for 6 weeks (set at 0-90 degrees). This should be worn at night but if you find it difficult to sleep then it may be removed (but you should be very careful if waking in the middle of the night). When walking, you will require crutches and should only 'touch weight bear'. This means resting your foot on the ground but not putting your body weight through it. You should try to avoid prolonged periods of standing, walking or sitting with a bent knee (e.g. long car trips). Otherwise try to go about your activities of daily living as your pain tolerates.

### **2. Swelling Control**

The first priority in the recovery process is to reduce the swelling in your knee and this can take several weeks to settle. Icing your knee (20 minutes every 3-4 hours) and elevating your leg above the level of your heart can help with this.

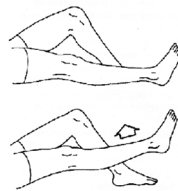
### 3. Driving

While the rules for driving in a brace are not clear, my recommendation is that you should avoid doing so while wearing a brace (i.e. in the first 6 weeks after your surgery).

### 4. Exercises

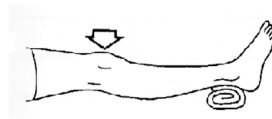
Before your first post-operative visit, you should perform some simple exercises everyday which are aimed at maintaining your muscle strength and knee range of motion. Please complete 5 sets of 10 repetitions (for a daily total of 50) of each of the following three exercises.

#### a) Straight Leg Raises



Lie on your back with your other knee bent. Keeping your leg straight and toes pointed to the ceiling, lift your leg about 30 cm off the ground and hold for 5 seconds. Lower gently and repeat. You should feel the muscles at the front of your thigh contracting.

#### b) Knee Extension



Lie on your back with a small rolled towel under your ankle. Push your ankle down into the roll which will make your knee straighten. Hold for 5 seconds then relax and repeat.

#### c) Knee Flexion



Apart from the above exercises, it is also important to bend your knee until you can feel a stretch (but not excessive pain). This is often easier sitting on a high chair or stool. You may find your knee to be quite stiff initially but you should make steady progress as your swelling comes down. Do not bend your knee past 90 degrees.

You should feel stretching but not pain with these exercises. You may need to ice your knee and elevate your leg afterwards if there is swelling. Avoid any exercise or activity which involves weights or undue force. At your first post-operative visit you will be advised regarding further exercises or physiotherapy.

### **Follow Up**

Please call the rooms on 1800553335 to schedule an appointment 10-14 days after your surgery.