Arthroscopy of the Knee

OS03 Lite - Expires end of January 2027

This fact sheet is for general information about this procedure only. It is not intended to be used as medical advice or to replace advice that your relevant healthcare professional would give you. If you have a particular medical problem, please consult a healthcare professional.

© EIDO Systems International Limited. The operation and treatment information in this document is published under license from EIDO Systems International and is protected by copyright laws. Other than for your personal, non-commercial use, you may not copy, print out, download or otherwise reproduce any of the information.

eidohealthcare.com

PATIENTS AUSTRALIA

EIDO HEALTHCARE

What is an arthroscopy of your knee?

An arthroscopy (keyhole surgery) allows your surgeon to see inside your knee using a camera inserted through small cuts on your skin. Your surgeon can diagnose problems such as a torn cartilage (meniscus), ligament damage and arthritis.

What are the benefits?

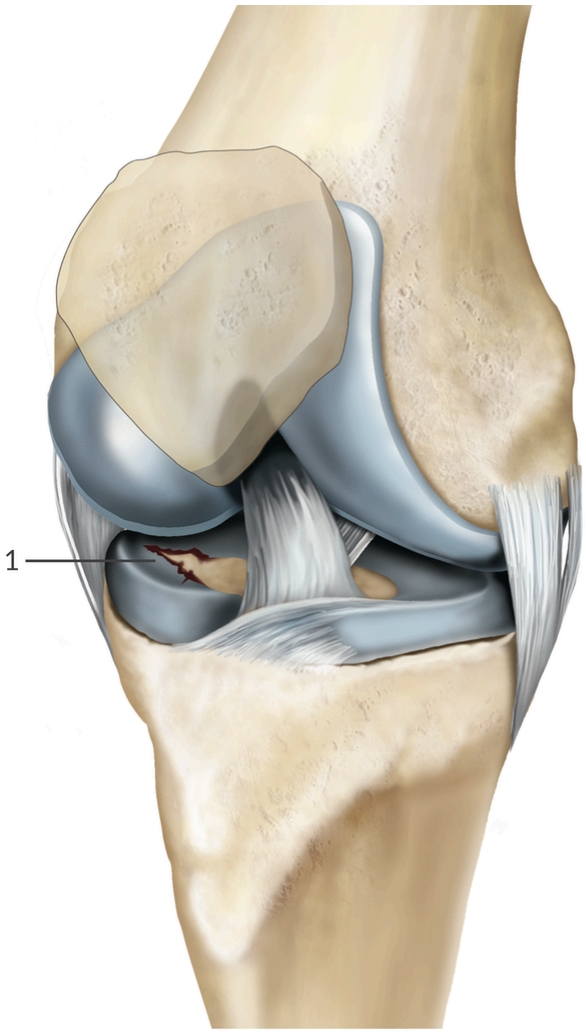
The aim of surgery is to confirm exactly what the problem is and for many people the problem can be treated at the same time. Keyhole surgery is associated with less pain after the procedure and, for some people, a quicker recovery.

Are there any alternatives?

Problems inside your knee can often be diagnosed using a magnetic resonance imaging (MRI) scan, but you may then need an arthroscopy to treat the problem.

Physiotherapy and anti-inflammatory painkillers such as ibuprofen can sometimes prevent or delay the need for an arthroscopy.

Knee with a tear in the lateral meniscus



© EIDO Systems International Illustrator: www.medical-artist.com

1. Tear

What will happen if I decide not to have the procedure?

Damage inside your knee does not usually heal without treatment.

If you have a torn cartilage, the tear can sometimes move out of place and cause your knee to lock. If your knee does not unlock again, you will need an urgent arthroscopy.

What does the procedure involve?

Different types of anaesthetic are possible. The procedure usually takes 30 to 45 minutes.

Your surgeon will examine your knee ligaments while you are under the anaesthetic and your muscles are completely relaxed. They will insert a small camera through one or more small cuts around your knee.

© EIDO Systems International Ltd.

Your surgeon will examine the inside of your knee for damage to the cartilages, joint surfaces and ligaments. It is usually possible for your surgeon to trim or repair a torn cartilage without needing to make a larger cut.

How can I prepare myself for the procedure?

If you smoke, stopping now may reduce your risk of developing complications and will improve your long-term health.

Try to maintain a healthy weight. You have a higher risk of developing complications if you are overweight.

Regular exercise should help you prepare for the procedure, help you recover and improve your long-term health. Before you start exercising, ask the healthcare team or your GP for advice.

Speak to the healthcare team about any vaccinations you may need to reduce your risk of serious illness while you recover. When you come into hospital, practise hand washing and wear a face covering when asked.

What complications can happen?

The healthcare team are trained to reduce the risk of complications.

Possible complications of this procedure are shown below. Some can be serious and may even cause death.

Any risk rates given are taken from studies of people who have had this procedure. Your doctor may be able to tell you if the risk of a complication is higher or lower for you. Some risks are higher if you are older, you are obese, you smoke or you have other health problems. Health problems include diabetes, heart disease or lung disease.

General complications of any procedure

- Bleeding during or after the procedure. If you get a lot of blood in your knee (a haemarthrosis), it will be swollen and painful.
- Infection of the surgical wound.
- Allergic reaction to the equipment, materials or medication.
- Venous thromboembolism (VTE). This is a blood clot in your leg (deep-vein thrombosis, or DVT) or one that has moved to your lung (pulmonary embolus).
- Difficulty passing urine.
- Chest infection. Your risk is lower if you have stopped smoking and you are free of Covid-19 symptoms for at least 7 weeks before the procedure.

Specific complications of this procedure

- Damage to nerves around your knee, leading to weakness, numbness or pain in your leg or foot. This usually gets better but may be permanent.
- Infection in your knee joint. Infection can cause permanent damage.
- Severe pain, stiffness and loss of use of your knee. Your knee can take months or years to improve. Sometimes there is permanent pain and stiffness.
- Difficulty passing urine.

Consequences of this procedure

- Pain.
- Scarring of your skin.

What happens after the procedure?

You should be able to go home the same day.

It is common for your knee to be a little swollen for a few weeks.

Walking can be uncomfortable and you may need to take painkillers to help relieve your pain.

Regular exercise should help you to return to normal activities as soon as possible. Before you start exercising, ask the healthcare team or your GP for advice.

Most people make a good recovery and can return to normal activities.

© EIDO Systems International Ltd.

Summary

An arthroscopy allows your surgeon to diagnose and treat some common problems affecting your knee, without the need for a large cut on your skin. This may reduce the amount of pain you feel and speed up your recovery.

Keep this information document. Use it to help you if you need to talk to the healthcare team.

Some information, such as risk and complication statistics, is taken from global studies and/or databases. Please ask your surgeon or doctor for more information about the risks that are specific to you, and they may be able to tell you about any other suitable treatment options.

This document is intended for information purposes only and should not replace advice that your relevant healthcare team would give you.

Reviewers

Bill Donnelly (MBBS, BMedSci, FRACS)

Stephen Milner (DM, FRCS (Tr)

Illustrator

Medical Illustration Copyright © Medical-Artist.com

© EIDO Systems International Ltd.