Revision Total Knee Replacement

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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.

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PATIENTS AUSTRALIA

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What is a revision total knee replacement?

A revision total knee replacement is an operation to take out parts of your old knee replacement and put in new ones.

A knee replacement can fail for the following reasons.

- Wearing out of the artificial joint
- Infection in your knee replacement
- Dislocation (coming out of joint)
- Fracture (break) of the femur or the tibia around your knee replacement

What are the benefits of surgery?

You should get less pain and be able to walk more easily.

Are there any alternatives to surgery?

If your symptoms are mild, you and your surgeon may decide to watch and wait for a while.

If your knee replacement keeps coming out of joint, you can wear a brace to try to keep your knee in place.

If you have an infection in your knee replacement, using antibiotics over the long term you sometimes prevent your knee replacement from failing.

If you have a fracture near your knee but the replacement is still well fixed to the bone, your surgeon may be able to fix the break with plates and screws without changing your knee replacement. Sometimes the break can be treated using a splint or cast.

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

The bone around a loose knee replacement can get thin and it may break (fracture). It is likely that you will need a major operation to fix the fracture and do your knee replacement again.

If you have an infection in your knee replacement, it can spread to other places around your body.

What does the operation involve?

Various anaesthetic techniques are possible.

Your surgeon will make a cut on the front of your knee. They will remove your knee replacement and any cement.

Your surgeon will put in a new knee replacement, which is often larger than your old one.

Your knee replacement is fixed into the bone using acrylic cement or special coatings on your knee replacement that bond directly to the bone.

The type of surgery you need can be more complicated if you have an infection, or the bone is thin or broken.

How can I prepare myself for the operation?

If you smoke, stopping smoking 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 to prepare you for the operation, help you to 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 might 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 will try to reduce the risk of complications.

Any numbers which relate to risk are from studies of people who have had this operation. 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, obese, you are a smoker or have other health problems. These health problems include diabetes, heart disease or lung disease.

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Some complications can be serious and may even cause death.

General complications of any operation

- Bleeding during or after the operation.
- Difficulty passing urine.
- Infection of the surgical site (wound).
- Allergic reaction to the equipment, materials or medication.
- Acute kidney injury.
- Blood clot in your leg (deep-vein thrombosis – DVT).
- Blood clot in your lung (pulmonary embolus), if a blood clot moves through your bloodstream to your lungs.
- Chest infection. Your risk will be lower if you have stopped smoking and you are free of Covid-19 (coronavirus) symptoms for at least 7 weeks before the operation.
- Heart attack. A heart attack can sometimes cause death.
- Stroke. A stroke can sometimes cause death.

Specific complications of this operation

- Split in the bone when your knee replacement is inserted, if the bone is weak.
- Damage to ligaments or tendons near your knee.
- 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.
- Damage to blood vessels around your knee, leading to loss of circulation to your leg and foot. You will need surgery straight away to restore the blood flow.
- Infection in your knee, which can result in loosening and failure of your knee replacement. If you get any kind of infection get it treated straight away.
- Loosening without infection. You may need another operation to do your knee replacement again.
- Dislocation of your knee replacement. You will usually need another operation, sometimes urgently.
- Continued discomfort in your knee.
- 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.
- Unsightly scarring of your skin.

How soon will I recover?

You can go home when your pain is under control, you can get about safely, and any care you may need has been arranged.

You will need to use walking aids until you can walk well without them. It often takes longer to recover from a revision knee replacement than your first knee replacement. If your knee replacement does not bend well, your surgeon may need to manipulate it.

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 most revision total knee replacements work well.

A revision total knee replacement can fail with time, if it wears out, or the original problem comes back.

Summary

If your original knee replacement fails, you can usually have another operation to do your knee replacement again. If this revision operation is successful, you should be able to continue many of your normal activities.

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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.

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