

Alternatives to Total Joint Replacement

In addition to joint replacement, there are other alternatives of care to be considered.

Injections, oral anti-inflammatories, and pain relievers are the first line of conservative care that we can provide. Although they will not stop joints from deteriorating, they can have some temporary benefit as long as monitoring of the joint is done every six months to make sure the joint is not deteriorating beyond the point where we will be able to repair it surgically.

Joint debridement, also called arthroscopy, provides a “clean up” of the joint and surrounding tissues. Arthroscopy can reduce symptoms for a while; however, it doesn't stop the deterioration, but it can slow its progress.

Partial replacement, also called unicondylar replacement or hemi-arthroplasty, may be an option if only part of your joint has been affected by arthritis. Although less of a long-term solution, early data is showing promising results. There is a mandatory weight limit at a body mass index (BMI) of 30 kg/m², which will be reviewed in the office to ensure the longevity of the replacement. Less weight also means a reduced risk of infection.

Osteotomy of the joint is done by a controlled break of the bone and positioning the joint in a new, angulated position. This technique is often used in people with congenital deformities or people who have been in accidents. Although temporary, it may provide years of use to the joint and delay replacement.

Fusion, which deletes movement of the joint so it will not move, is sometimes used in infections and/or trauma on failed joint replacements. It is not used in younger, more active individuals as it once was because it may result in increased stress and pain in surrounding joints.

In summary, each of the above can be used in selected instances. Feel free to visit the rest of our website for more information on these techniques.