

Post-operative physiotherapy advice following a knee arthroscopy

Physiotherapy Patient Information

You have just had your knee arthroscopy at the RUH. In this leaflet you will find all the key information for you to begin your recovery. Your body starts healing straight away, following this advice you will optimise your early rehabilitation.

Depending on the findings from the arthroscopy you may have some different guidance around the amount of weight you should put through your leg. If this is the case you will receive individual guidance from the surgical team before you leave hospital.

Important things to know about ...

Pain

Your knee is likely to be very sore after the surgery; this is part of the normal healing process. This may continue over the next few weeks and may affect your sleep, movement and walking. The pain can result in weakness, muscle inhibition and unhelpful movement compensations, so it is very important that you take your painkillers as advised to facilitate good movement.

Swelling

Your knee is likely to be very swollen after the surgery; this is part of the normal healing process. This can persist over the next few weeks; this may impact your ability to regain the full movement of your knee and impact your muscle activation which can slow your recovery. It is important to reduce your swelling - elevating your leg above your heart, icing and compression can help with this.

Movement and exercise

Movement and exercise is essential to your recovery. In most cases you may walk normally, putting weight through your operated leg (unless informed by you're the surgical team before you leave hospital). In this leaflet, the exercises are designed to improve the amount of movement in your knee and optimise your thigh muscle strength. With these you are looking to hit the sweet spot of activity, not too much or too little. Most commonly people do too little exercise and too much walking.

Crutches

You may need to use elbow crutches to allow you to walk normally for the first couple of days. After this, you should be able to walk without crutches within a few days, if you feel comfortable and confident. Your surgical team may require you to use crutches for a longer period of time. If this is the case you will receive individual guidance before you leave hospital.

Anaesthetic

You may have had a general anaesthetic to undergo the surgery. This can take up to 24 hours to recover from. It is important you are picked up or driven home and stay with a responsible adult up to 24 hours.

Dressings

After the surgery you will have a large crepe bandage over your knee, this is removed around 72 hours post-surgery. You will have dressings on and these should be left in place for at least 10 days after your surgery. The wound can bleed or leak this is normal, if you feel there is more than normal then you should consider contacting your GP.

Driving

This can vary for each individual depending on comfort and progress made. In order to drive safely you must have regained good muscle control and movement in the operated leg, be able to walk without crutches and be able to complete an emergency stop. You should also contact your insurance company to notify them about your operation and to check the validity of your insurance

Work

The amount of time required off work will vary between each individual. If you have a physically demanding job or are involved in heavy manual work, your duties may need to be modified depending on the procedure you have had.

Follow up

You are usually followed up in hospital a few weeks after your operation for a review of your progress. This will give you an opportunity to get more information about your operation and ask any questions you have. It may be worth making a note of any questions you want answered prior to your appointment.

You may be referred to physiotherapy in the next few weeks to continue the rehabilitation you are starting today.



Your goals in the first few weeks (0 – 2 weeks) are

- Increase your knee movement, ideally a 0 degrees extension (straight knee) and at least 90 degrees flexion (knee bend)
- Restore the quadriceps muscle activation (wake up the thigh muscles)
- Normalise your walking using crutches and then begin to wean them slowly
- Allow the wounds to heal
- To have your pain and swelling well controlled

Tips to optimise your rehabilitation

- Take regular pain relief as prescribed or over counter medications. Having your pain well controlled in these early stages is essential as it will make things more comfortable; making it easier to move, complete the exercises and sleep.
- Even though it's comfortable, DO NOT put a pillow under your knee for extended periods as it can impact your ability to get your knee straight.
- Manage the swelling - Things that can influence swelling positively are elevating the leg above the heart, ice and compression.
- Measure your swelling regularly as it can guide how active to be - use a tape measure to measure around your knee to give you a rough estimation, you are looking to see it reduce over time, if your swelling increases it may be your knee telling you to reduce your activity.
- Don't rush off your crutches, use them to optimise your walking pattern, build up tolerance walking with them, and then aim to wean off them. You may drop down to one crutch which is used in the opposite hand, then down to no crutches. Coming off them too soon can aggravate the knee and reinforce unhelpful compensation patterns.
- Rest is important, getting the right balance of rest, being active and doing the exercises is key in these early stages.
- Aim to complete the exercises little and often, every day. They are designed to help you achieve the goals at each stage. Although we want a straight knee there is no need to push this in the early stage, as it can be sore and add to the pain and swelling. Be patient the range of movement and muscle activation will come in time.



Exercises

Ankle Pumps - To reduce risk of blood clots

Lying down or sitting, pull your ankles up towards you and point them away from you in a repeated motion, pumping them up and down.

Aim to complete 10 pumps 4 – 5 x per day



Knee straightening exercises

Lie on your front on your bed or sofa, with your feet dangling off the bed, making sure your shins are only half off the bed.

Hold this position for up to 10 minutes 3 - 4 x per day

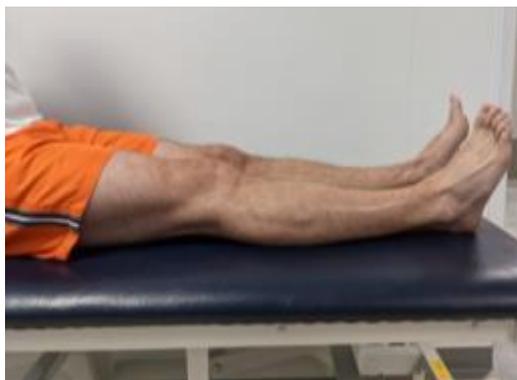




Knee bending exercises

While lying down or sitting up with your legs out straight in front of you, slide your heel up the bed, bending your knee as far as comfortable. Then slide your heel down straightening your knee, then repeat.

Aim x10 Slides 4 – 5 x per day



And / Or

While sitting in a chair with your legs out in front of you, slide your heel towards you bending your knee as far as comfortable. Then slide your heel back out straightening your knee, then repeat.

Aim x10 slides 4 - 5 x per day





Quadriceps muscle exercises

While lying down or sitting with your legs out in front of you, place a rolled up towel underneath your knee making a bend in your knee (this is the only time to place a towel under the knee).

Tense your thigh muscles, straightening your knee and raising your heel off the bed.

Aim 10 squeezes and lift 4 – 5 x per day



As you progress and it becomes easier to straighten your knee, you can repeat the exercise with a smaller towel.



As you progress further, your goal is to have a straight knee with a good thigh muscle contraction, being able to hold for 10 seconds.



Quadriceps muscle exercises continued ...

While lying or sitting with your legs out straight in front of you. Tense your thigh muscle straightening the knee, and then lift your whole leg up keeping it straight, then lower down in a controlled fashion.

Aim 10 lifts 4 – 5 x per day



Potential complications to be aware of after the operation

- It is reasonably common to notice an area of numbness over the front of your knee. This occurs because the nerve that supplies sensation to this area can be injured during the surgery. The area may shrink in size over time but it is possible you will always have a small area of numbness or altered sensation.
- There is a small risk of having a blood clot in your leg known as a deep vein thrombosis (DVT). To reduce the risk of DVT you should avoid any long distance travel (particularly anything 3 hours or longer) for 3 weeks post-operatively and avoid long haul flights for 6 weeks. Keeping yourself mobile and doing the ankle pump exercise will help with this. However, it is very important that you attend your nearest emergency department if the calf muscle becomes painful increasingly red, hot, swollen or shiny.
- Infections following this type of surgery are not common. However, if you notice an increase in pain, warmth, redness or swelling in the leg with or without general symptoms of an infection (fever, sweating, chills, etc.), please contact the ward or on call orthopaedic team.

Useful Links:

Here are some videos to help you do your exercises at home; you can find them on the Royal United Hospital Bath website www.ruh.nhs.uk/knee or scan the QR code below.



Royal United Hospitals Bath NHS Foundation Trust
Combe Park, Bath BA1 3NG
01225 428331 www.ruh.nhs.uk

Please contact the Patient Advice and Liaison Service (PALS) if you require this leaflet in a different format, or would like to feedback your experience of the hospital. Email ruh-tr.pals@nhs.net or telephone 01225 825656 / 826319.