



ARTHROSCOPY

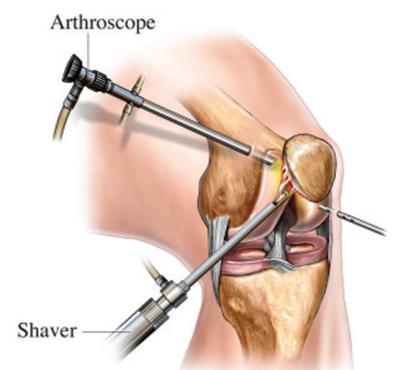
Surgeons use arthroscopy as a means of seeing inside joints. Initially used as a diagnostic tool, Watanabe, a Japanese surgeon, developed the technique of knee arthroscopy in the 1960s. More extensive procedures were popularized in the 1980s. Each year orthopaedic surgeons perform more than five million arthroscopies.

During an arthroscopic procedure a small device called an arthroscope is inserted into a joint through a small cut. The tiny lens and fiber optic light of the arthroscope is connected to a camera and monitor that allows the orthopaedic surgeon to see inside the joint and perform a variety of different procedures.

When do you need arthroscopy?

While many different conditions in many kinds of joints can be treated with an arthroscopic procedure, it is not right for every problem or every patient. A surgeon can tell if the problem can be treated with arthroscopy or if a more invasive approach may be better. Surgeons sometimes still use arthroscopy as a diagnostic tool, occasionally performing both arthroscopy and an open procedure afterward. Knee arthroscopy for a torn meniscus remains one of the most common orthopaedic procedures.

The knee and the shoulder are the most common arthroscopy areas with more than four million knee arthroscopies and 1.4 million shoulder arthroscopies performed annually, worldwide. Most large or medium sized joints, such as knees and shoulders, can be repaired using arthroscopic approaches.





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What are the advantages of arthroscopy?

With the small incisions needed for arthroscopic procedures, these surgeries are typically less painful than similar open procedures. Arthroscopy also affords the surgeon an outstanding view of the inside of the joint with many different specialized techniques, procedures, and instruments. In most cases, surgery that years ago was done through an open approach now can be done via an arthroscopic approach, with similar long-term outcomes, decreased post-operative pain, and shorter hospital stays. Additionally, most arthroscopies are outpatient procedures.

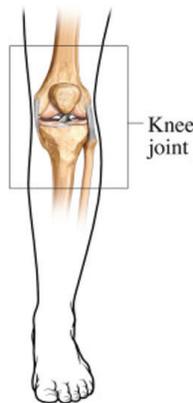
What kind of anesthesia is available?

Many arthroscopic surgeries are done using regional anesthesia during which only the area or extremity that is being operated on is anesthetized. General anesthetic may be preferred in some cases. A surgeon and anesthesiologist will work with you prior to surgery to determine the best solution.

What are the potential complications of arthroscopy?

Complications during or after most arthroscopic surgeries are rare, however, every surgery has risks. The complications which can occur during or following an arthroscopic procedure include:

- Blood clots
- Infection
- Joint stiffness
- Damage to nerves or blood vessels



What can be expected following surgery?

Healing is different from patient to patient and from procedure to procedure. Even though the incisions are small, a surgeon may have done a large amount of work inside the joint. This can include ligament repair and reconstruction. The procedure performed will dictate a rehabilitation schedule much more than the size of the incisions. Every person is different, so be sure to ask the surgeon what to expect and when various activities are allowed post-operatively.

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