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Study: Little benefit to arthroscopic knee surgery - Arthroscopic knee surgery for arthritis - performed hundreds of thousands of times a year - does not reduce joint pain or improve knee function, according to new research released Wednesday.

By Denise Gellene
Los Angeles Times

Arthroscopic knee surgery for arthritis — performed hundreds of thousands of times a year — does not reduce joint pain or improve knee function, according to new research released Wednesday.

The study of 178 adults with moderate to severe arthritis found the surgery, in which damaged bone and cartilage are removed through tiny incisions, had no benefits beyond nonsurgical treatments, such as physical therapy.

The report in the New England Journal of Medicine confirmed the results of a 2002 study that caused many orthopedic surgeons to discontinue the practice. Others continued to perform the surgeries, dismissing the earlier study because its subjects were predominantly men.

The latest report should put all doubt to rest, said Dr. Brian Feagan, a professor of medicine at the University of Western Ontario in Canada and a study au-

thor.down, causing them to rub together. Symptoms include pain and stiffness.

The study divided patients into two groups: one received the surgery and the other served as a control. People with large cartilage tears were excluded.

All participants received an hour of physical therapy weekly for 12 weeks and were assigned to perform exercises twice daily at home. In addition, all patients used pain relievers as needed and were offered oral glucosamine and injections of hyaluronic acid, a knee lubricant. Patients were tracked for two years.

Patients who received surgery showed greater improvement during the first three months, researchers said, but that advantage was gone after six months.

By the end of the study, there was no difference between the groups.

"The take-home message is that for this level of arthritis, surgery is not any better than nonsurgical treatment," said Dr. David McAllister, associate pro-

fessor of orthopedic surgery at UCLA's David Geffen School of Medicine who was not involved in the study.

Researchers said the results were not a complete disappointment. Both groups showed marked improvement in pain and mobility, providing evidence that physical therapy and medical treatments alone can be effective.

A second study in the journal, cautioned that the surgery might not be effective even in cases in which there is clear cartilage damage. In many cases, this damage is the result of normal wear and tear and surgery won't help.

"Identifying a tear in a person with knee pain does not mean that tear is the cause of the pain," Dr. Robert Marx of the Hospital for Special Surgery in New York wrote in an accompanying editorial.

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