

Study Finds Knee Surgery Holds Even in Heavier Patients

Success rates for meniscus surgery were similar for those with average and higher BMI

The Ohio State University Wexner Medical Center

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NEWS PACKAGE



SUGGESTED TEASE	STILL TO COME, NEW INFORMATION THAT COULD CHANGE HOW DOCTORS LOOK AT KNEE SURGERY. WHY SOME ARE TAKING WEIGHT <i>OUT</i> OF THE EQUATION TO HELP MORE PATIENTS GET BACK ON THEIR FEET.
ANCHOR LEAD	<p>EACH YEAR NEARLY SIXTY THOUSAND AMERICANS INJURE THEIR MENISCUS¹ - THE CARTILAGE THAT SITS BETWEEN YOUR KNEE AND SHIN BONE.</p> <p>AND IN THE PAST, SOME DOCTORS MAY HAVE TAKEN A PATIENT'S <i>WEIGHT</i> INTO CONSIDERATION BEFORE PERFORMING SURGERY TO REPAIR IT.</p> <p>SOME DOCTORS FEAR THE REPAIRS MIGHT NOT BE AS EFFECTIVE IN THE KNEES OF HEAVIER PATIENTS, BUT A NEW STUDY IS PROVING THAT THEORY WRONG. CLARK POWELL EXPLAINS.</p>
(PACKAGE START) -----	
CG: Courtesy: Ohio State Wexner Medical Center :00 - :03	(Nats - Sound) :02
Shots of Steven in rehab	STEVEN DOUKIDES (due-KEY-dees) DIDN'T THINK MUCH OF IT WHEN HE RECENTLY HOPPED OVER A POT HOLE WHILE CROSSING THE STREET. :05
CG: Steven Doukides Had meniscal repair surgery	<i>"Well, my knee kind of hyperextends, I slip, and try and catch myself with that leg. Well, it pops. I go down, and I was on the ground."</i> :09
Shot of surgery	<p>TURNS OUT, STEVEN TORE HIS MENISCUS AND UNDERWENT SURGERY TO REPAIR IT.</p> <p>WITH REHAB, HIS KNEE IS NOW GETTING STRONGER, BUT NOT EVERY DOCTOR WOULD HAVE RECOMMENDED SURGERY TO REPAIR HIS MENISCUS.</p>
Shots of Steven in rehab	SOME DOCTORS MAY ASSUME THAT THE HEAVIER A PATIENT IS, THE MORE STRAIN THERE IS ON THE KNEE AND THE MORE LIKELY IT IS THAT THE SURGERY WILL ULTIMATELY FAIL.
Shots of Steven doing exercises	BUT A NEW STUDY IS PROVING THAT THEORY WRONG. :22

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<p>CG: Dr. David Flanigan Ohio State Wexner Medical Center</p> <p>Shots of Flanigan with Steven</p> <p>Shots of knee exam</p> <p>Shots of surgery</p> <p>Dr. Flanigan (CG'd earlier)</p> <p>Shots of Steven in rehab</p> <p>Steven Doukides (CG'd earlier)</p> <p>Shot of Steven in rehab</p> <p>(PACKAGE END) -----</p> <p>ANCHOR TAG</p>	<p><i>“When we looked at the results, patients who had a higher BMI, and we defined a higher BMI as greater than 25, did not have an increased failure rate compared to those who had a low BMI.” :12</i></p> <p>DOCTOR DAVID FLANIGAN OF THE OHIO STATE UNIVERSITY WEXNER MEDICAL CENTER LED THE STUDY.</p> <p>HE FOLLOWED MORE THAN 400 PATIENTS FOR TWO YEARS AFTER MENISCUS SURGERY.</p> <p>HE FOUND NO DIFFERENCE IN SUCCESS RATES OF PATIENTS - IF THEY HAD A BMI UNDER 25 OR UP TO 35.²</p> <p>FLANIGAN SAYS THAT PROVES A PATIENT’S WEIGHT SHOULDN’T BE A MAJOR FACTOR IN DECIDING IF SURGERY IS APPROPRIATE.</p> <p>AND, IN FACT, REPAIRING RATHER THAN REMOVING THE MENISCUS CAN ACTUALLY PREVENT OTHER ISSUES IN THE FUTURE. :26</p> <p><i>“Trying to save that meniscus, saves that cushion, prevents some of the arthritic changes down the road within their knee and it can be very beneficial for them.” :08</i></p> <p>THAT’S SOMETHING STEVEN IS COUNTING ON, CONSIDERING EVERYTHING HE’S ALREADY BEEN THROUGH. :04</p> <p><i>“You don’t realize how important it is getting around until you are immobilized, until you can’t get around.” :06</i></p> <p>AT OHIO STATE WEXNER MEDICAL CENTER, THIS IS CLARK POWELL REPORTING. :03</p> <hr/> <p>AS WE GET OLDER AND HEAVIER AS A SOCIETY, MORE MENISCUS SURGERIES ARE EXPECTED IN THE FUTURE.</p> <p>THIS STUDY LOOKED AT PATIENTS WITH B-M-I’S UP TO 30 - BUT MORE STUDIES WILL BE NEEDED TO SEE HOW REPAIRS HOLD UP WITH PATIENTS WHO ARE EVEN HEAVIER.</p>
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SOCIAL MEDIA

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	<p>repair to fail. But a new study by The Ohio State University Wexner Medical Center found that's not the case. Researchers say meniscus repairs held up just as well for heavier patients as it did for those with lower body mass indexes. Details: bit.ly/2kV8f3y</p>
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EXTRA BITES

<p>CG: Dr. David Flanigan Ohio State Wexner Medical Center</p>	<p>Flanigan says BMIs as high as 30 made no difference: <i>"We even looked at if we went all the way up to 30, did it make a difference? It really didn't. So, to us, this was quite surprising that their weight or BMI did not have an impact as far as success rate."</i></p> <p>Flanigan says weight shouldn't be a factor in doing surgery: <i>"From what we can tell now is that we should not consider that and if you have a repairable meniscus that's appropriate for that patient, you can try to repair it and they would have the same success to someone who is not as heavy."</i></p> <p>Flanigan says more meniscuses can be repaired in the future: <i>"In the future, we might be able to repair more than 10 to 15 percent of the meniscus. We might be able to repair 30 or 35 percent of them. And hopefully save a lot of these patients from developing arthritic changes really early in life."</i></p> <p>Flanigan explains why surgeons assumed repairs would fail: <i>"Logically thinking about it, they're carrying a greater load. That load is even greater across the knee joint and we know higher loads across the knee joint can cause increased risk of arthritis. So, Our thought process was that likely that increased load would be detrimental to a repair."</i></p>
<p>CG: Steven Doukides Had meniscal repair surgery</p>	<p>Doukides talks about the pain of his knee injury: <i>"It was, you know, like an 8 out of 10 kind of thing, higher end of pain than I had ever really experienced. And I knew, I tried walking on it, I knew something was wrong."</i></p> <p>Doukides says he's glad his meniscus was able to be repaired: <i>"Knowing that I had my knee repaired correctly now, and that I have a somewhat better chance of not developing those kind of things in the future is, you know, really important."</i></p>

References

<p>¹<i>Trends in Meniscus Repair and Meniscectomy in the United States, 2005-2011, American Journal of Sports Medicine, Volume 41 Number 10, July 2013.</i> Online: http://journals.sagepub.com/doi/full/10.1177/0363546513495641</p>
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²*The Relationship between Body Mass Index and Risk of Failure following Meniscus Repair*,
Journal of Knee Surgery, January 2016. Online:

<https://www.thieme-connect.com/products/ejournals/abstract/10.1055/s-0035-1569480>

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