



Keyhole surgery of the knee

These instructions are intended for printing. The instructions contain sections to be filled in.

Keyhole surgery of the knee (Arthroscopy) is performed, if an internal structural damage of the knee is suspected. Torn medial and lateral meniscus are common injuries caused by rotational motion. The injury may be due to an accident or degeneration that is usually connected to arthritis of the knee.

Other conditions treated using keyhole surgery are for example damaged surface cartilage, irritated fold of the synovial membrane in the joint (plica syndrome), and loose bodies. Possible symptoms caused by these conditions include pain, locking, and swelling.

Procedure

Keyhole surgery of the knee is usually performed under spinal anaesthesia, and patients may observe the procedure through a monitor if they want to. The duration of the anaesthesia is approximately 3–4 hours. Patients cannot move their legs by themselves, nor can they walk or stand during the anaesthesia.

In the keyhole surgery, a 0.5 centimeter thick arthroscope is taken into the joint through a small incision in the skin. The picture provided by the camera in the arthroscope is seen on a television screen. In the procedure, the torn area of the meniscus, plica, or loose bodies inside the joint are removed with an instrument. The procedure takes approximately 30–60 minutes. 2–3 small wounds are left from the surgery, depending on the number of instruments required.

Rehabilitation

You may walk immediately after the anaesthesia wears off. However, you should avoid heavy physical effort for a week. At first, you may use crutches as a support for a few days. You should move gradually to the normal level of physical effort within 2–3 weeks.

During the first few days, the knee will be slightly swollen, and consequently the knee may feel less flexible than usual.

Wound care

The dressings may be removed after 24 hours, after which you may shower. Elastic bandage may be used for a few days to support the knee.



The sutures are removed after 7–12 days at your health Centre, occupational health Centre, or health clinic (neuvola) (____/____). You may go to sauna 24 hours after the removal of the sutures.

Treatment of pain

Regular pain relief medication, elevated position, elastic bandage, and ice pack therapy efficiently reduce swelling and pain after the operation, contributing to the recovery. It is recommended that you take pain killers regularly for 1–4 days and after that when necessary:

Paracetamol

Anti-inflammatory

Strong painkiller

Other medication

Possible follow-up checkup with doctor or physiotherapist according to the follow-up treatment plan in the operative report.

Sick leave is 1–2 weeks depending on your occupation.

Return to work

From the specialized medical care, a 1-2-week sick leave is written after the procedure. A referral from the specialized health care is made when the surgery date is determined to the occupational health care for work capacity assessment and support measures for return to work. Your occupational health care will contact you after the procedure to plan work capacity assessment in relation to your work tasks and return to work in a timely manner.

Contact us

If you experience inflammatory symptoms (increasing pain, heavy swelling, warmth, redness, continuous wound discharge) or other problems, contact your health Centre or treating unit.

Day Surgery Unit on working days from 07.00–15.00, telephone 06 213 1552

Your own health Centre or occupational health Centre

Telephone nursing services from 15.00–08.00 on Monday–Thursday and from 14.00–08.00 on Friday and 24 hours a day during weekends and on midweek holidays, telephone 116 117



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This instruction is suited for patients and clients.