

Suturation of a meniscus tear using keyhole surgery

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

A small tear of the meniscus is usually treated by removing the torn area. Some tears of the meniscus are extensive and require suturing. Removing the whole meniscus would cause a risk of arthritis. Symptoms of an extensive tear of the meniscus are pain and locking.

Procedure

The operation is performed using keyhole surgery through small incisions (arthroscopy), operation is usually performed under spinal anaesthesia. An extensive meniscal tear is sutured, if technically possible, depending on the type of the damage. The torn edges are sewn together by using absorbable arrows and screws, and certain suturing techniques, if necessary.

Rehabilitation

Essential to the healing process is to efficiently restore the strength of the quadriceps muscles. For that reason, movement exercises of the knee are required from the very beginning. Crutches are used for 4–5 weeks. During these weeks you must not put any weight on the weak leg except its own. However, you may put full body weight on the leg, if the knee is held fully straight.

The knee may be swollen, causing the knee to feel stiffer than usual. It is important to move your ankle and toes to avoid deep vein thrombosis.

Wound care

The dressings may be removed after 24 hours, and you may shower. Elastic bandage may be used for about a week 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 2–4 days and after that when necessary:



Instruction created 27.09.2023

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 4 weeks from the surgery.

Return to work

From the specialized medical care, a 4 weeks 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.