

The New York Arthritis Reporter

Arthritis Foundation, Inc., New York Chapter • 122 East 42nd Street • New York, New York 10168-1898 • (212) 984-8700

Spotlight on Knee Surgery

"The knee is a very complex and important joint. It is subjected to multi-directional forces, and because of that, it can be extremely fragile," says Dr. Patrick A. Meere, Assistant Professor of Orthopaedic Surgery at the NYU Langone Medical Center and Hospital for Joint Diseases. Many people living with constant pain in their knees would certainly agree with Dr. Meere and are eager to learn more about the most effective strategies to decrease their level of knee pain.

However, before discussing the variety of treatments available for knee discomfort, it is first necessary to understand the source of your pain. Knee disease is a very broad category. There is the type of pain that is the result of some sort of injury, and then there is pain caused by arthritis: either a systemic inflammatory condition such as rheumatoid arthritis (RA) or a mechanical breakdown of cartilage caused by osteoarthritis (OA). This distinction is important when seeking out the appropriate medical treatment.

Once you have seen your physician and have determined (through clinical examination as well as x-ray, MRI or any other means deemed necessary by your doctor) the underlying source of your knee pain, it is only then that you should begin to weigh your options for treatment. Most physicians would agree that surgery should only be considered once a

patient with knee OA has exhausted all other non-surgical options. These include:

- weight loss
- reducing all strenuous physical activities that place excess pressure on the joint
- use of a knee brace
- anti-inflammatory medication
- cortisone or viscosupplementation injections
- physical therapy

If you find that these options are not providing adequate relief for your knee pain, you may consider knee surgery such as an arthroscopic procedure (where the inside of the joint is cleaned and smoothed and cartilage is often repaired with the aid of a pencil-sized camera) or, as a last resort, knee replacement.

A recent set of studies published in the *New England Journal of Medicine* indicate that arthroscopic surgery for OA of the knee may not be as beneficial as the public once believed. However, Dr. Meere elaborates on this conclusion. He explains, "There *are* some patients who may still benefit from knee arthroscopy, such as someone who has mild OA coupled with symptoms of a serious meniscal injury. This includes swelling and sharp, knife-like pain on the inside of the knee." If, however, a patient has more diffuse pain caused by progressive OA

without any symptoms of a meniscal tear, he or she may not be the right candidate for arthroscopy.

So, what is the bottom line? Physicians and patients, alike, must be careful to consider each individual case of knee pain as a unique situation that deserves specialized attention in terms of treatment.

In cases where a person has attempted all non-surgical treatments without success and is not a candidate for arthroscopy, a knee replacement may be recommended. "Knee replacement surgery can be extremely successful, but people must remember that it is a serious undertaking. Patients must be sure that they are truly committed to working hard after the surgery," says Dr. Meere. The "work" to which he refers is the intensive physical rehabilitation that is necessary in order to decrease pain and keep the new joint flexible. Typically, a person can expect seven to ten days of intensive physical rehabilitation at an inpatient facility after surgery, followed by outpatient physical therapy. Most people are able to resume walking without a cane at approximately four to six weeks after surgery and a return to more strenuous activities can be expected between eight to twelve weeks later. Although this process may seem daunting to some, the results can be life-changing.



(Continued on page 2)

Partners In Research

The Chapter is pleased to announce that it has once again partnered with **Merck & Co., Inc.**, to offer research opportunities to young osteoarthritis (OA) investigators from leading medical institutions throughout New York City. Now, in its fourth year, **The Merck & Co., Inc./Arthritis Foundation, New York Chapter Fellowship Award in Osteoarthritis** is instrumental in promoting new advances in the prevention and treatment of OA.

This year, the Chapter has also established a new research partnership with **Centocor**, and is thrilled to announce the first **Centocor / Arthritis Foundation, Inc., New York Chapter Fellowship Award in Inflammatory Arthritis**. This fellowship encourages new developments from young investigators in the field of rheumatology, with work focused specifically on the prevention and treatment of inflammatory arthritis.

This issue is underwritten by an educational grant from Wyeth.





Mark Fisher, MD, MPH

Meet Our New Investigators

For the past four years, the Chapter has sponsored young investigators whose research focuses specifically on recent advances in osteoarthritis (OA) and the field of orthopaedics. The innovative research that



Ran Schwarzkopf, MD

is accomplished through the support of these fellowships is critical to developing leading professionals and advances in the field of arthritis. This year's **Merck & Co., Inc./Arthritis Foundation, New York Chapter Osteoarthritis Research Fellow** was awarded to **Mark Fisher, MD, MPH** and the **sanofi aventis/Arthritis Foundation, New York Chapter Fellowship in Orthopaedics** was awarded to **Ran Schwarzkopf, MD**. Both of these physicians are from the NYU Langone Medical Center and Hospital for Joint Diseases.

Dr. Fisher's project, **Ethnicity Factors on Total Knee Replacement Surgery in Osteoarthritis** is an examination of the impact of race, ethnicity and financial status on the availability of arthritis-related health care. Dr. Fisher is studying the rate of knee replacement in communities across the country. By exploring the impact of different demographic factors on the rate of joint replacement surgery, Dr. Fisher hopes to understand the current trends in order to develop better strategies to provide more universal access to this important procedure. In addition, Dr. Fisher is examining how the impact of these demographic factors on joint replacement surgery has changed over time.

In his project, **Acoustic Emission Studies: Monitoring of Hip and Knee Prosthesis Wear and Disease Progression in Osteoarthritis Patients**, Dr. Schwarzkopf has focused his research on a key aspect of joint replacement surgery - longevity. Currently, replacement joints are typically estimated to last for approximately 20 years for a hip and over 17 years for a knee. Dr. Schwarzkopf has been working on developing a noninvasive method for evaluating the condition of a patient's knee or hip prosthesis in order to determine the accurate lifespan of the implant. Over time, prostheses typically loosen, leading to renewed pain and the need for a second replacement surgery. With the use of acoustic emission technology (analyzing the joint vibrations), Dr. Schwarzkopf hopes to help patients have a more accurate timeframe for the longevity of their prosthesis.

The research efforts by both Dr. Fisher and Dr. Schwarzkopf are clear examples of the type of work necessary to promote progress in the field of joint replacement. As this type of surgery becomes increasingly more commonplace, professionals in the field, as well as their patients, must strive to stay well-informed on the most recent trends and up-to-date developments.

Knee Surgery (continued from page 1)

People who have had successful knee replacements (which typically last over seventeen years before needing revision) are often able to resume daily activities that they never thought possible prior to surgery.

"Remember, there is no miracle development in the field of knee surgery," advises Dr. Meere. "There have certainly been a lot of evolutionary steps in the past several years, but no revolutionary ones." When considering surgery, "it is critical to make sure to find an experienced surgeon with a solid reputation, be wary of unproven new technologies, seek out second opinions, educate yourself through peer-reviewed journal articles and, lastly, be an advocate for yourself. It is your body and your health. You deserve to feel confident, secure and well-informed."

For more information about treatments for knee arthritis, or to request a copy of the free brochure, *Hip and Knee Replacement Surgery*, please contact the **New York Arthritis Exchange™** telephone helpline at (212) 984-8730, or, from the 914 or 845 area codes only, (800) 246-2884.

A distribution of \$300,000 from the estate of Gloria E. Gurney will support arthritis research.



Advocacy Update Upcoming Training Session

Don't miss your chance to participate in the Chapter's ninth **Arthritis Advocates in Action Training** session, sponsored by **Pfizer Inc**, to be held at the New York Chapter office, 122 East 42nd Street, 18th Floor, on Thursday, **December 11th at 5:30 PM**.

This training is an excellent opportunity to learn about the variety of ways to get involved in arthritis advocacy on the city, state and federal level. This year, the training includes:

- keynote address from Caryn Resnick, Deputy Commissioner at the New York City Department for the Aging
- updates on the New York State and New York City capacity building initiatives
- a presentation by Suresh Sani, a member of the Chapter's Board of Governors and a dedicated arthritis advocate

The training will be moderated by Sara B. Kramer, MD, rheumatologist at New York University and Chair of the Chapter's Government Affairs Committee. For more information or to register for the training, please contact Michele Greco at 212-984-8712 or mgreco@arthritis.org.

Arthritis Bill Passes in the House!

The Arthritis Foundation applauds the U.S. House of Representatives for passing the Arthritis Prevention, Control and Cure Act (H.R. 1283), the first comprehensive, bipartisan arthritis legislation in more than 30 years, on September 27th, 2008. The legislation is co-sponsored by nearly 250 members of the U.S. House of Representatives and 55 members of the U.S. Senate. The Arthritis Act's journey now continues to the Senate side of the Capitol. Although the House and Senate have both recessed until after the November elections, Senate Majority Leader Reid has announced a "lame duck" Senate session starting the week of November 17th. Arthritis advocates and supporting Senators are working around-the-clock to get the Arthritis Act included in this session.



Lillian Colbert remembered the Chapter in her will with a bequest of \$7,500.

NEW YORK CHAPTER



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Take Control. We Can Help.™

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Copies of our financial and operating report have been filed with the state and are available upon request. To obtain one, write: Office of the Attorney General, Department of Law, Charities Bureau, 120 Broadway, New York, NY 10271, or contact us at the address above.

Questions and Answers

Janet Cahill, PT, is the Section Manager of Inpatient Physical Therapy at the Hospital for Special Surgery.

Q: People often speak about the importance of physical therapy after knee replacement or arthroscopic surgery. Can you speak about the steps that patients must take before these procedures?

A: Pre-operative education is a critical element for patients who are undergoing surgery. By meeting with your physical therapist (PT) prior to the procedure, he or she will prepare you for what to expect after surgery. In addition, your PT can create a home exercise program—specifically tailored to your needs—that will help your surrounding musculature be at its best prior to surgery and give you the best chance for a speedy and healthy recovery.



Q: What can a person who is about to undergo knee replacement surgery expect?

A: First and foremost, a person who is about to undergo this surgery needs to be committed to his or her recovery. This means that the person must be diligent about their home exercise program, report feedback to their physician and their physical therapist about any problems they are experiencing and stay on top of their pain management. Although this may seem overwhelming, these are the necessary steps. By following these steps, you should have a successful outcome after surgery!

Q: What types of exercises do you use in a post-operative knee rehabilitation program?

A: A comprehensive exercise program for the knee should include exercises that will address difficulties related to balance, gait, flexibility, range of motion, strength and function. The goal is to ultimately have the patient perform at a higher level of function in all daily activities including: going up and down stairs, getting out of a low chair, walking longer distances, etc. This can be accomplished with a variety of activities geared at improving the total function of the knee. In addition, patients will also want to work on their cardiovascular exercises as prescribed by their physical therapist or doctor.

Q: Many people are scared that the pain from their surgery will prevent them from committing to physical therapy. What would you say to people who are concerned about this?

A: Pain can definitely limit your activity after knee surgery. Because of this, it is critical that you and your physician have an aggressive and robust approach to pain management. Patients are often surprised at how well they can actually function once their pain has decreased. Education is key to making sure you stay “ahead” of the pain.

In fact, physical therapy can actually be one step toward *controlling* that pain. Through application of heat or cold therapy and performing a variety of gentle exercises, physical therapy can help you to strengthen your joint and improve its function, ultimately decreasing your pain.

Q: What are some of the other benefits of physical therapy and rehabilitation after knee surgery?

A: One thing that I’ve noticed with patients is that physical therapy helps to promote a better sense of independence. Often, after a knee procedure, patients find it frustrating to rely on other people to help them with their daily activities. In addition to the benefits of exercise, physical therapy improves their mood and self-confidence, and shows them that they are capable of achieving great strides with a genuine commitment to their exercise program.

For more information, call the **New York Arthritis Exchange™** at 212-984-8730, or, from the 914 or 845 area codes only, (800) 246-2884.

Upcoming Programs

The upcoming months are filled with a variety of opportunities for you to learn more about arthritis! The Chapter’s public education programs offer participants the opportunity to hear noted rheumatologists and leading medical professionals in the New York area present on a variety of critical topics related to arthritis. Please join the Chapter at one of the following FREE events, held in different communities throughout the Chapter region.

November 19, 2008, 1:00-2:00 PM
Current Treatment Options for Arthritis
Pelham Senior Center
Pelham, NY
Sponsored by **Centocor**

November 22, 2008, 9:00-1:00 PM
Charles Christian Symposium: Today’s Treatment Options for Osteoarthritis Management
New York University Medical Center,
Farkas Auditorium
550 First Avenue (north of 30th Street)
New York, NY

December 4, 2008, 11:00-12:00 PM
Current Treatment Options for Arthritis
Isabella Senior Center
(Bilingual: English/Spanish)
Sponsored by **Wyeth**

December 13, 2008, 4:00-5:00 PM
Current Treatment Options for Arthritis
Corona Library, 38-23 104th Street
Corona, NY
Sponsored by **Wyeth**

For more information or to register for any of these programs, please contact the **New York Arthritis Exchange™** at 212-984-8730, or, from the 914 or 845 area codes only, (800) 246-2884, or ayanawoods@arthritis.org.

Women and Arthritis



Although arthritis can affect anyone, regardless of race, gender or age, the statistics are clear—more women than men are diagnosed with arthritis. **Sixty percent of all people who have arthritis are female and many of the common forms of arthritis are more prevalent in women.** Among those are rheumatoid arthritis, lupus, osteoporosis, fibromyalgia and some types of osteoarthritis. With this in mind, it is critical for women to become well-educated about these diseases and empower themselves with the necessary tools in case they, or others close to them, are ever affected by one of these conditions.

This winter, the Chapter is thrilled to present the third *Women’s Health Summit for Arthritis*, sponsored by **Abbott**, held on **Monday, December 8th from 5:00 - 8:00 PM** at the Lighthouse International Conference Center, The Sol and Lillian Goldman Building, 111 East 59th Street. The *Summit* will include presentations about the many different challenges faced by women with arthritis. Topics to be covered:

- Overview of the different types of arthritis that impact women
- Coping strategies
- Information about the latest arthritis medications
- Strategies on how to balance life in and out of the workplace

Please join us at this exciting, informative and FREE event! For more information or to register, please contact the **New York Arthritis Exchange™** at 212-984-8730, or, from the 914 or 845 area codes only, (800) 246-2884, or ayanawoods@arthritis.org.

A distribution of \$15,000 from the estate of Adeline Hunold will support programs for people with arthritis.

Kids get Arthritis, Too Family Day



A Great Day for Learning



The Chapter would like to thank all of the people who made the *Kids Get Arthritis Too Family Day* on November 2nd, sponsored by **Amgen**, such a great success! Children with arthritis and their families gathered at the New York Hall of Science in Queens for a day filled with fun and learning. While the kids explored the exhibits and experienced, first-hand, the many ways that science relates to everyday life,

the parents were participating in their own educational workshop. Topics covered by Dr. Beth Gottlieb from Schneider's Children's Hospital included: strategies on raising a child with arthritis as well as new treatment options and critical coping mechanisms for parents. A good time was had by all!

Upcoming Kids Programs:

This spring, the Chapter will be hosting two fun and educational events for children with arthritis and their families:

- **An Afternoon at Chelsea Piers:** This is an action-packed afternoon of age-appropriate activities for children with arthritis, ages 5 to 16. Parents will get an update from health specialists on the latest in research advances and treatments, along with exercise and nutrition guidelines for their children with arthritis. Chelsea Piers is located at 23rd Street and Hudson River Park in Manhattan.



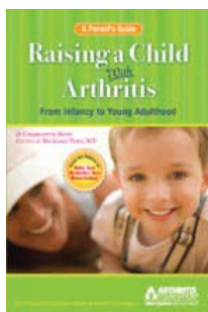
- **Family Day at the Castle:**

Similar to the Chelsea Piers event, this program will have fun activities for children with arthritis and educational opportunities for their parents. The Castle Fun Center is located on Route 17M in Chester, New York

To learn more about these exciting and free programs, please contact Ayana Woods at 212-984-8711 or ayanawoods@arthritis.org.



The all-new publication, **Raising a Child with Arthritis** addresses many of the concerns parents have about JA from diagnosis and treatments to family and financial issues. From the editors of the *Kids Get Arthritis Too* newsletter, the book is written in easy to understand terms and offers solutions for the challenges parents face when their child has arthritis. *Raising a Child with Arthritis* provides facts about various types of JA and information about new treatments such as biologic drugs, while also providing practical information on giving shots, navigating the education system, coping with flares and managing daily activities without pain. In addition, parents and young adults who grew up with the disease share their experiences and tips for success throughout the book. Published by the Arthritis Foundation (2008). Retail price \$14.95. To order this book, please visit www.arthritis.org, and click on "store" at the top right corner of the page.



Dates to Remember

Metro Sportsmed Physical Therapy
For additional information or to register, please call: 718-369-8041 or visit www.metro-sportsmed.com.

Osteoarthritis and the Benefits of Weight Loss

December 17th

12:00-1:00 PM
4911 13th Avenue
Brooklyn, NY

December 24th

12:00-1:00 PM
1309 Avenue J
Brooklyn, NY

Osteoporosis and Bone Health

January 21st

12:00-1:00 PM
4911 13th Avenue
Brooklyn, NY

January 28th

12:00-1:00 PM
1309 Avenue J
Brooklyn, NY

Hospital for Special Surgery

For more information about this program, call: (212) 774-7326

Assistive Devices for Arthritis

November 19th

2:30-3:30 PM
535 East 70th Street
New York, NY

Physical Therapy at Briarcliff

For more information about this program, call: (914) 762-2222 X 2157

Free Chronic Pain/Fibromyalgia Support Group

Wednesdays, starting January 7th

5:30-6:30 PM
584 North State Road
Briarcliff Manor, New York

Programs require pre-registration. For further information, call the **New York Arthritis Exchange™** at (212) 984-8730 or, from the 914 and 845 area codes only, 800-246-2884.

Visit these Features on our Web site

- Arthritis Advocates in Action
- Advocacy News
- New Brochures
- Kids Get Arthritis, Too
- Research Update
- The New York Arthritis Reporter
- Información en español



Please visit us at our website at:
<http://newyork.arthritis.org>

Rose Lerner remembered the Chapter in her will with a bequest of \$2,000.

The estate of Georgette Viellion made a bequest of \$5,000 to the Chapter.

**In the Next Issue:
Kids and Arthritis**