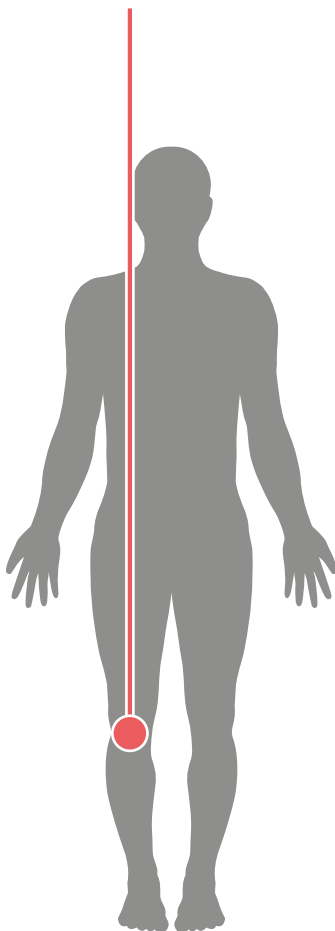


Get Well Soon

Helping you to make a speedy recovery after arthroscopic operations on your knee for meniscal tears

Arthroscopic surgery



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This leaflet is a guide to recovering from arthroscopic operations on the knee. It does not provide specific medical advice or diagnosis. Nor does it give advice about whether you should consent to an operation. All of these matters depend on individual medical advice from your consultant surgeon based on your own health, medical condition and personal circumstances..

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Who this leaflet is for

Print instructions:

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To print only one page, select the page number you want in your print menu, usually under 'options' or 'preferences' depending on the printer type.

To save ink, select the 'draft' option.

This leaflet is for anyone who is recovering from, or is about to undergo, surgery to have a torn meniscus dealt with by keyhole or arthroscopic surgery.

The technical term for your operation is arthroscopic knee surgery, which may include partial meniscectomy or meniscal repair. This is how your surgeon and other health professionals who are helping you may refer to it.

This leaflet should be read in conjunction with any other information you have already been given about your procedure.

The following information is designed to help you make the important decisions about your recovery. Your surgeon, general practitioner (GP) and other healthcare professionals will offer you a lot of very good advice – but ultimately it's you that has to make the decisions.

Most patients who have this operation will be in and out of hospital on the same day.

The advice in this leaflet offers broad guidelines for people who do not have any complications with their surgery or other specific medical circumstances, such as a long-term condition. Obviously, every individual has different needs and recovers in different ways – so not all of the advice in this leaflet will be suitable for everybody.

When you're weighing up how to make the decision that's right for you, talk to your surgeon, your GP, or with your Occupational Health Service at work, if you have one. They will all help you to make the right choices for a safe and speedy recovery.

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What to expect after the operation

Painkillers

Painkillers may well cause constipation, so it is important to get plenty of fibre in your diet while you are recovering. Fresh fruit and vegetables will help to keep your bowels moving regularly and try to drink plenty of water, but no more than 2 litres a day.

There will be some variation both in the extent of each individual patient's surgery and their body's response to it; patient recovery programmes may therefore vary.

Scar

You'll have between 2 and 4 scars around your kneecap. Each one will be about 1–2 cm in width. They may be closed with dissolvable stitches, skin glue or stitches that need to be removed. They are usually covered with waterproof dressings.

Stitches

If you have stitches that need to be removed, this can usually be done by the practice nurse at your GP surgery, 7–14 days after your operation. Your hospital should already have given you advice about how your wounds are closed and how to care for them.

Dressings

You should keep the scars covered for the first 48 hours and then leave them uncovered. You do not need to worry about getting the scars wet after the first 48 hours. Many patients have concerns that standing up straight will pull at the stitches. Don't worry about this. Getting out of bed and standing up straight will actually help you to recover more quickly.

Discomfort

Your surgeon may have put some local anaesthetic on your knee during the surgery and will give you some pain relieving tablets to take home. You will experience pain and discomfort around the scars, especially in the first few days, and you will also experience some swelling in the knee. This is all perfectly normal, but you should seek advice if your knee starts to bleed.

Tiredness

Your body is using energy to heal itself, so you may feel more tired than normal – as your physical activity levels improve you will steadily start to feel less tired.

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Things that will help you recover more quickly

If you live alone, and you do not have family or friends close by, organise support in advance - have family or friends come to stay with you for the first few days after surgery if possible.

Eat healthily

Eating a healthy, balanced diet will help to ensure that your body has all the nutrients it needs to heal.

Stop smoking

By not smoking – even if it's just for the time that you're recovering – you immediately start to improve your circulation and your breathing – not to mention a whole list of other benefits to the heart and lungs.

Family and friends

Family and friends can give you two important things:

- Practical help with the tasks you might be temporarily unable to do while you recover - such as driving, the weekly shop, or lifting heavier items.
- Keeping your spirits up!

Keep a routine

Get up at your normal time in the morning, get dressed, and move about the house. If you get tired, you can rest later.

Physiotherapy

You will have been taught exercises by a physiotherapist while in hospital; it is important to continue these at home for as long as you are advised. Some patients may also need additional outpatient physiotherapy follow-up.

Deep Vein Thrombosis (DVT) Prophylaxis

To avoid the risk of DVT, it's best to use a TED (thrombo-embolic deterrent) stocking for 2 weeks following the operation; either above the knee or below the knee.

Build up gradually

Have a go at doing some of the things you'd normally do, but build up gradually. Some suggestions are included in the recovery tracker. Obviously, everyone recovers at a different speed, so not all of the suggestions will be suitable for everybody.

When you're building up your activities, you may feel more tired than normal. If so, stop, and rest until your strength returns. If you feel pain, you have probably just overdone it a little. Ease back on your activities for a day or two and then gradually increase them again. If you are concerned, consult your GP.

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Returning to work

You do not need your GP's permission to go back to work – this is ultimately your decision.

Fact: Work can be part of your recovery

Everyone needs time off to recover after an operation – but too much of it can stand in the way of you getting back to normal. In fact, by staying off for too long, people can become isolated and depressed. Getting back to your normal work routine sooner rather than later can actually help you to recover more quickly.

Getting back to work

How quickly you can return to work depends on a number of things:

- How you heal
- How you respond to surgery
- The type of job you do

The type of job you do is particularly important with arthroscopic knee operations. People whose work involves a lot of heavy lifting, standing up or walking for long periods, or a lot of driving, will not be able to return to work as quickly as those who have office jobs, which are less demanding physically.

How soon can I go back?

Every person recovers differently and has different needs. If you are in an office job, it is possible to return to work within 2–3 days, but how soon you go back will also depend on how you get to work – whether you need to drive, whether you have access to, and can manage, public transport, and so on. In most cases though, the average is 10–14 days after the operation. Some individuals who have a more demanding physical job, or one that involves heavy manual work, may need to take up to 6 weeks off.

In the first instance, your surgeon will help you work out what is right for you, and if your employer has an occupational health nurse or doctor they will also be able to advise you. Alternatively your GP can give you advice. Ultimately, it's your decision when you decide to go back, and there's no insurance risk to your employer if you choose to do so.

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Planning for your return

3 golden rules for a speedy recovery:

Stay active.

Keep a normal daily routine.

Keep social contact with people.

Talk to your Occupational Health service or GP to work out when and how is best for you to return to work.

Depending on the nature of your job, you might want to ask your employer about returning to work on lighter duties at first. This means:

- Spending more time sitting, rather than standing for extended periods or doing lots of walking.
- Doing work that is mostly paperwork, using a computer or telephone.
- Not carrying heavy items any significant distance.
- Avoiding tasks such as prolonged loading or unloading, packing or unpacking.

If you have an HR Department at work, they will be able to advise you regarding sick pay or any other benefit you may be entitled to during your time off. Alternatively, talk directly with your employer.

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Driving

Ultimately, it is your responsibility to ensure that you are in control of the vehicle at all times and to feel confident that you would be able to demonstrate this if asked.

Your insurance company should be informed about your operation. Some companies will not insure drivers for a number of weeks after surgery, so it's important to check what your policy says. It may depend on which knee has had surgery, especially if your car has an automatic gearbox.

Normally, you should refrain from driving for at least 1 week after an arthroscopic knee operation, until the swelling reduces and the knee motion improves, but you should establish with your doctor when it is safe to start driving. You will need to be fully recovered from your surgical procedure and you should also be free from the distracting effect of pain or the sedative or other effects of any painkillers you are taking. You also need to be free of any physical restrictions due to your operation, be comfortable in the driving position and able to safely control your car, including freely performing an emergency stop.

Driving - an exercise

After about 7–10 days, you might want to test your fitness to drive. Do this in a safe place without putting the keys in the ignition: simply sit in the driving seat and practise putting firm pressure on the pedals. If you feel pain, you are not yet ready to drive. If you feel sore afterwards, you may need to wait a day or two and try again. Only when you feel you can put enough pressure on the pedals to do an emergency stop should you think about driving again.

It is advisable not to restart driving with a long journey.


Notifying the Driver and Vehicle Licensing Agency (DVLA)

After arthroscopic meniscectomy, you do not need to notify the DVLA unless instructed to do so by your doctor. Higher medical standards are required for those holding a Class 2 licence to drive lorries and buses, so for reasons of safety and comfort your doctor may advise you to delay driving for a little longer.

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Recovery tracker

Days/Weeks Post Op	How you might feel	Things you can do safely	Traffic light	Fit to work?
1–2 days	Your knee will be sore and swollen after the operation. You may have pain from where the scars are and on the site of the knee where the meniscus was dealt with. You will also feel a lot more tired than normal. Take things easy.	<ul style="list-style-type: none">• Get up, get dressed, move around the house.• Eat and drink as normal.• Do the exercises that your physiotherapist has taught you.• If you feel tired, rest for a while and try moving around again later.		No

When can I have sex?

For many people, being able to have sex again is an important milestone in their recovery. There are no set rules or times about when it's safe to do so other than whether it feels OK to you - treat it like any other physical activity and build up gradually.




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Recovery tracker

Days/Weeks Post Op	How you might feel	Things you can do safely	Traffic light	Fit to work?
3 days	There should be much less pain in your knee, but there will still be some swelling; use ice packs to reduce this. Your movement will be by no means full at this stage and you will still be stiff bending your knee. You'll also get tired more quickly than you did before the operation.	<ul style="list-style-type: none"> Continue as days 1–2. Go for a short walk in the morning – no more than 5–10 minutes – then go home and rest. Go for another short walk or two later in the day, resting between each one. This will help to avoid stiffness of the muscles and joints. Walking won't harm you, but it may be a little uncomfortable. You may still occasionally need to take a mild painkiller at this time 	 	Not just yet
4–6 days	There should be very little pain now, though you will still feel tired as your body uses extra energy for healing. There may still be some swelling; if so, continue to use ice packs.	<ul style="list-style-type: none"> Continue as on day 3, building up the number of activities you do around the house, perhaps going for a slightly longer walk each day. Keep track of your activities using the recovery diary – build up slowly and steadily. Flying is best avoided in the first 4–6 days after your operation. 		No, but you may feel able to do a couple of hours a day of administrative work from home.

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Recovery tracker

Days/Weeks Post Op	How you might feel	Things you can do safely	Traffic light	Fit to work?
7–13 days	You'll probably be able to do most things as normal, most of the time, but you will still get tired now and again.	<ul style="list-style-type: none"> Continue to build up the amount of activity you're doing towards your normal levels. Monitor your progress using the recovery diary, as earlier. Walking, swimming, cycling and light exercise are allowed, as long as the wound is comfortable. Swimming: breaststroke can be difficult at this stage, so if you want to do a few lengths in the pool, you may find it easier to stick to front crawl or backstroke initially. After days 7–10, you might want to test your fitness to drive. 	 	Normally after day 10, on light duties or reduced hours
14+ days	You should be feeling stronger each day. You will still walk with a limp if you walk long distances, but you should be able to manage shorter distances without too much difficulty. Impact sports should typically be avoided for up to 6 weeks.	Talk with your doctor about going back to work (if you haven't already).		Yes

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Recovery tracker

Days/Weeks Post Op	How you might feel	Things you can do safely	Traffic light	Fit to work?
2 - 4 weeks		Most people who've had the operation will be back at work by now, unless there are special circumstances – for example, their job demands a lot of physical exertion, heavy manual work or there are specific safety considerations.		Yes
6 weeks	<p>If you haven't had any complications to do with your surgery, or you don't have a particularly physically demanding job and you're still off work, it's possible that you're feeling anxious about returning and could do with a bit of help from your GP and your employer. Talk with them both about a gradual return to work.</p> <p>If you're off for too long, there's a risk of developing problems to do with anxiety, isolation and lack of confidence. These could affect your quality of life in the long term. Talk with your doctor about how best to avoid this becoming a problem for you. If you rest too much your knee will become very stiff, and will take much longer to heal. You will also lose physical fitness and it can be difficult to regain this when the knee settles down. If you don't feel able to work at this stage, you should at least take the opportunity to exercise. Walking may be uncomfortable, but should not harm the knee. If you are unable to exercise as much as you are used to, be careful you do not eat too much and put on weight.</p>			Yes

Returning to sport

If you really enjoy sport and are fit enough, many surgeons will suggest a simple, post-operation exercise protocol:

- At 2 weeks you can use an exercise bike.
- At 4 weeks you can use a cross trainer.
- At 6 weeks you can start on the treadmill, as you are able.
- By 8 weeks for most people, you can be back to sports.

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After you get home

Day	Got up at ... am	Activities (eg walked for ... minutes)	How many hours rest I needed?	What times I needed to rest:	Went to bed at ... pm	How have I been feeling?	What do I want to achieve tomorrow?
1							
2							

Keeping a track of what you've achieved each day will help you to stay positive and get back to enjoying your normal life more quickly.

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After you get home

Day	Got up at ... am	Activities (eg walked for ... minutes)	How much rest I needed after each:	Went to bed at ... pm	How have I been feeling? Any pain?	What do you want to achieve tomorrow?
3						
4						
5						
6						
7						
8						
9						

Remember, take a step-by-step approach to getting better, and build up your activities in small stages. Don't push yourself too far too fast. If you're concerned about anything, or if you feel you're not making progress fast enough, ask your surgeon or call your GP.

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After you get home

Day	Got up at ... am	Activities (eg walked for ... minutes)	How much rest I needed after each:	Went to bed at ... pm	How have I been feeling? Any pain?	What do you want to achieve tomorrow?
10						
11						
12						
13						
14						

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Keeping well

Because of your operation, the chances are you'll be a lot more aware of your body and how it works.

Right now is a really good time to build on the knowledge you've gained and make small changes to your lifestyle that can prevent you from experiencing certain health problems in the future. You can do this by:

- Any exercise – even if it's just a few short walks each day – really will make a difference to your health.
- Improving your diet – get 5 portions of fresh fruit and veg per day.
- Quitting smoking – NHS Stop Smoking Services are one of the most effective ways to stop for good – and they're free. Your doctor will be happy to help you.

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Website links

The internet's a great thing – anything you want to know is there for you at the click of a mouse but, do be careful about the way you use it when it comes to getting information about your health. It's hard to know which sites to trust, and none of them can tell you anything that's specific to your individual medical needs.

If you do want to know more about your operation, recovery or return to work, here is a list of trusted websites that offer safe, sensible, useful information:

The Royal College of Surgeons of England
<http://www.rcseng.ac.uk/>

British Orthopaedic Association
<http://www.boa.ac.uk/>

British Association of Surgery of the Knee
<http://www.baskonline.com/>

British Orthopaedic Sports Trauma Association
<http://www.bosta.ac.uk/>

BoneSmart
<http://bonesmart.org/>

NHS Stop Smoking Service
<http://smokefree.nhs.uk/>

NHS Choices
<http://www.nhs.uk/Pages/Homepage.aspx>

Department for Work and Pensions
<https://www.gov.uk/government/organisations/department-for-work-pensions>

GOV.UK
<https://www.gov.uk/>

DVLA - Driver and Vehicle Licensing Agency
<https://www.gov.uk/browse/driving/disability-health-condition>

Call 111 for nonemergency medical advice