

Partial Lateral Meniscectomy Surgery

The problem:

Tear of the padding cartilage of the knee. The torn cartilage is on the part of the knee that is not between the two legs.

Reason for treatment:

Pain.

The treatment:

The torn cartilage generates pain although the exact mechanism is not fully clear. Treatment is focused on removing the torn fragment or repairing it. Most meniscus tears are not repairable. Several factors are considered for repair including the pattern, location, and size of the tear as well as the age of the patient. Whether or not a tear is removed or repaired is considered on a case-by-case basis, but most tears are partially removed.

Removing a portion of the torn meniscus has no positive or negative impact on arthrosis/arthrititis. The meniscus tear itself is part of the process called arthrosis/arthrititis. The simple presence of the meniscus tear is an indication that arthrosis/arthrititis will develop in the future, however it is not clear how fast it will develop or how problematic it will be. It should be noted that lateral meniscus tears often progress to arthrosis/arthrititis more rapidly than medial meniscus tears. Surgery does not slow down or speed up that process. Surgery is purely for pain relief.

Day of surgery:

The patient should plan to arrive 2 hours prior to the procedure to get situated and meet the operative team. The procedure is done arthroscopically, through three holes. It requires a total time of less than one hour in the operating room. The patient is asleep for the procedure. Recovery room time is approximately 1 hour. Plan to be in the hospital for 4-5 hours.

After surgery:

The patient can bear partial weight for 1-2 weeks and bend and extend the knee. This is uncomfortable and painful for several days. Exercises will be given for the patient to do at home when they are in the Recovery room. These should be started the day after surgery and be done daily until clinic follow-up in 1-2 weeks. Recovery is slow and, although some patients may recover in a few weeks, most patients will require 3-6 months to notice a significant improvement. Swelling is common and may last for six weeks or longer, particularly for lateral meniscus tears. It can be managed by icing the knee several times each day (20 minutes each time), using a compressive wrap (ACE), and taking an anti-inflammatory medication (Advil, Aleve, etc.).