



American Association of Hip and Knee Surgeons

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### **Survey: Surgeons Recommend Long-term Follow-up Care For Total Hip and Knee Replacement Patients**

PARK RIDGE, ILL. – Orthopaedic surgeons recommend that patients who have undergone total hip or knee replacement surgery receive follow-up care for 10 or more years in an effort to detect problems that often have no symptoms, but can lead to joint replacement failure, according to a new study appearing in the December 2003 issue of *The Journal of Arthroplasty*.

Periodic, long-term follow-up care may improve the likelihood of reducing complex and costly revision surgeries, which carry risks and often require a lengthy recovery time, according to researchers.

The study, the first of its kind, surveyed members of the American Association of Hip and Knee Surgeons (AAHKS) to determine what specialists recommend for follow-up care and the frequency of visits for total hip and knee arthroplasty (joint replacement) patients. The written questionnaire was mailed in 2001 to 682 AAHKS members and 447 physicians (65.5 percent) responded.

“We found that 80 percent of the orthopaedic surgeons who responded to the survey recommended that patients have a clinical exam and X-rays every one to two years for more than 10 years,” said Steven M. Teeny, M.D., chairman of the AAHKS Research Committee and lead author of the study. “The earlier we can detect problems – some of which have no symptoms – the greater the chances of reducing the severity of joint failure.”

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In 2000, surgeons performed more than 450,000 hip and knee arthroplasties, according to the American Academy of Orthopaedic Surgeons (AAOS). The AAOS reported that there were 28,000 revision surgeries for total hip arthroplasty and 31,000 revision surgeries for total knee arthroplasty.

In December 2003, a National Institutes of Health (NIH) Consensus Panel concluded that total knee replacement surgery is a safe, cost-effective therapy – restoring mobility and eliminating discomfort – and successful in the vast majority of patients, after a review of 20 years of follow-up data. In 1994, an NIH Consensus Panel concluded that most patients who have total hip replacement surgery have an excellent prognosis for long-term improvement in physical functions and symptoms.

“Through periodic follow-up and routine X-rays, orthopaedic surgeons can identify silent, but potentially significant, problems such as subtle implant changes in the joint due to wear, bone loss or loosening of the implant,” said Dr. Teeny, president of the NorthWest Orthopaedic Institute in Tacoma, Wash. “If these problems are caught early, a patient may be able to have less complex revision surgery – which may include replacing the implant and reconstructing the joint and the surrounding bone. This surgery can have high risks for the patient and recuperation may be long and costly.”

Survey results showed that 95.9 percent of the surgeons surveyed recommended regularly scheduled clinical exams and review of an X-ray of the replaced joint by an orthopaedic surgeon.

For hip arthroplasty: 45.9 percent of the surgeons recommended an annual visit during the first five years, and 39.5 percent recommended biennial visits. During the 6-to-10-year period, 31.9 percent recommended annual visits and 50.1 percent biennial. After 10 years, 37.3% recommended annual visits, and 42.9% recommended biennial visits.

For knee arthroplasty: 44.9 percent recommended annual follow-up visits and 40.4 percent biennial during the first five years. During the 6-to-10-year period, biennial was the follow-up pattern recommended (50.2 percent) over annual (30.3 percent). After 10 years, 36.5% recommended annual visits, and 43.5% recommended biennial visits.

“Some joint replacement patients forget to come in, move away or just don’t follow up

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with their doctor until they have serious problems – such as joint pain, dislocation or fractures,” said Sally York, M.N., R.N.C., clinical coordinator for NorthWest Orthopaedic Institute in Tacoma, Wash., and investigator in the study. “We want patients to enjoy a good quality of life with mobility and without pain, and regular orthopaedic follow-up care is important to achieve these goals.”

According to Dr. Teeny and York, the survey results are a step forward in educating orthopaedic surgeons and other healthcare providers – such as primary care physicians, nurses and physical therapists – about the need for long-term follow-up care of patients with total hip and knee replacements. The AAHKS supports the need for additional research to further develop clinical treatment plans that are based on scientific evidence.

Dr. Teeny; York; J.Wesley Mesko, M.D.; and Ruth E. Rea, Ph.D., R.N.C., were investigators in this study, “Long-term Follow-up Care Recommendations after Total Hip and Knee Arthroplasty: Results of the AAHKS Member Survey.” An article reprint can be ordered online at <http://www2.arthroplastyjournal.org>.

Established in 1991, the AAHKS ([www.aahks.org](http://www.aahks.org)) is comprised of 800-plus members who are board-certified orthopaedic surgeons with specialized training in hip and knee replacement surgery. These specialists devote 50 percent or more of their practice to hip and knee arthroplasty. Based in Park Ridge, Ill., the not-for-profit AAHKS provides current educational, research and communication opportunities for the membership and their patients to allow continued quality management of arthritic disorders of the hip and knee. The AAHKS is sponsoring the production of a television documentary on the benefits of joint replacement from a patient’s viewpoint, to air in 2004.