

GENDER BENDER

Knee replacements made to fit for both sexes (502 words)

Orthopaedic surgeons at St. Joseph Medical Center perform more knee replacements (insert #) than any other Baltimore or any other Maryland hospital. This distinction was reported in the *Baltimore Business Journal's* List of the Top Area Hospital Procedures for 2007.

Outcome studies have shown that volume and quality at St. Joseph go hand in hand, and one important factor in these results is that orthopaedic surgeons there work carefully to fit the right implant for each and every patient, whether male or female.

“It creates a misconception to call something a female knee replacement,” says joint replacement specialist Dr. Brian Mulliken. “No replacement is universally appropriate to one gender or another. At St. Joseph, we choose from more than a dozen types of knee replacements in different sizes and shapes to insure the best fit for our patients.”

“During the operation, we measure the knee, using special instrumentation, such as jigs and calipers, which allow us to be very precise. Our volume of knee replacements allows us to continuously improve our standards and offer the latest technology.”

This state-of-the-art approach is exactly what Adriane Miller, who is only age 50, needed. Miller grew up skiing in Colorado with her family, but suffered congenital problems with her knee that finally left her unable to “even walk my dog,” she recalls. Her lowest point was going back to Colorado several years ago to ski with her 80-year-old father, and having to hobble down the hill in tears, while he finished the run alone.

Miller consulted many orthopaedic surgeons but could not find an orthopaedist who would perform a knee replacement due to her age. Instead, she was told to limit her activities. “It was very discouraging to think of giving up all the things I love,” she says.

She decided to consult Dr. Mulliken, who had recently done a hip replacement for her husband and he was very pleased with the outcome of his surgery.

“For younger patients, it becomes a matter of impaired quality of life. If they’ve exhausted nonsurgical treatment, such as anti-inflammatory medicines, therapy and activity moderation, there may be no other option than a knee replacement to get them back to a healthy lifestyle,” says Mulliken.

“The number of knee replacements in the U.S. has gone up dramatically. People are placing more demands on their knees; arthritis and injuries take a toll; there are congenital problems such as Adriane’s, and obesity and inflammatory conditions are factors. More women are getting knee replacements than men, and the reason may in part be genetically-based,” he says.

Usually, six to eight weeks of physical therapy are needed after surgery, and Adriane admits that rehabilitation was challenging. But she declares, “A knee replacement is absolutely worth it if you want to continue an active lifestyle.”

Though she won’t ever ski black diamond slopes again, she has resumed hiking and even did some moderate skiing last winter.

“It’s extremely rewarding to hear that a patient feels better and to be told how grateful they are after a knee replacement. Being able to improve a patient’s quality of life is why I went into this profession,” says Mulliken.