

What you need to know about joint replacement surgery



Patient guide

Getting back **on the move**

So, you've decided to speak to a surgeon about the pain you've been experiencing in your hip or knee. Your surgeon may have spoken to you about joint replacement surgery—an option for adults suffering from osteoarthritis of the joint.

You're not quite sure what to expect from the surgical experience, but you do know that you don't want a one-size-fits-all solution to a problem that is very personal to you.

This educational guide is designed to help you understand more about how to prepare and what to expect before, during and after your joint replacement surgery.



A **replaced** knee

A **replaced** hip

Questions to ask your doctor

Having trouble knowing where to start? These starter questions will help you talk about your pain with your doctor. They'll also help you and your doctor determine if joint replacement makes sense for you.

- What are options to help relieve my joint pain?
- How much relief will non-surgical or surgical treatment options give me?
- Is joint replacement surgery covered by my insurance?
- Do you use technology as part of your surgical practice?
- Which company's joint replacement products do you use? Why?
- Will you be performing the surgery?
- How many joint replacements have you performed?
- How much pain will I feel after surgery, and how is it managed?
- How long will I be in the hospital?
- Will I have mobility restrictions? For how long?
- How long before I can return to my normal activities?

Over 30 million
Americans suffer from
osteoarthritis¹

For more information, visit **patients.stryker.com**

Preparing for surgery

Preparing for your joint replacement begins weeks before the actual surgery. The checklist below outlines some tasks that your doctor may ask you to complete in the weeks prior to your surgery date.

In the weeks prior

- ☐ Exercise under your doctor's supervision
- ☐ Have a general physical examination
- ☐ Have a dental examination
- ☐ Review medications
- ☐ Stop smoking
- ☐ Lose weight



Diet and exercise

Closer to the surgery

- ☐ Arrange a preoperative visit
- ☐ Get laboratory tests
- ☐ Complete forms
- ☐ Prepare meals
- ☐ Confer with a physical therapist
- ☐ Plan for post-surgery rehabilitative care



Review medications

The night before

- ☐ Fast
- ☐ Bathe surgical area with antiseptic solution



Get laboratory tests

Did you know?

A healthy diet can help patients heal and may reduce complications associated with knee replacement surgery.²



Tips for you and your caregiver

You may need assistance after surgery, so consider making arrangements with a caregiver, such as a family member or friend, before your surgery date. It is important to communicate with this person prior to surgery about how they can best help you when you return from the hospital. Below are some preparation tips for you and your caregiver to discuss with your doctor.

1. Encourage your caregiver to attend your pre- and postoperative appointments so they can talk to your doctor about how to best help you after surgery.
2. Ask what you can do to reduce unnecessary movement in the first few days following your return home. This may mean organizing the items you use on a daily basis within arm's reach.
3. Think safety first, and ask yourself whether you will need to remove floor rugs, cables, or clutter that may cause you to slip and fall.
4. Ask if a walking aid, such as a cane or walker, is appropriate for you to use after surgery.

Did you know?

A **physical therapist**

will work with your **orthopaedic specialist** to recommend exercises such as:

- **'Pushing,'** or isometric exercises, to help build muscle strength
- **'Pulling,'** or isotonic exercises, to further increase muscle strength and help preserve function
- **Daily walking**



The day of surgery

Every hospital has its own procedures, however, joint replacement patients may expect their day-of-surgery experience to follow this basic routine:

Before surgery

1. Arrive at the hospital at the appointed time and complete the admission process.
2. Receive a final pre-surgery assessment of vital signs and general health.
3. Have a final meeting with anesthesiologist and operating room nurse.

During surgery

4. Receive an intravenous (IV) catheter for administration of fluids and antibiotics.
5. Get transported to the operating room.
6. Receive your joint replacement surgery.
7. Get transported to a recovery room.

After surgery

8. Your vital signs will be monitored until your condition is stabilized.
9. You will be transported to an individual hospital room.
10. Your vital signs and surgical dressing will continue to be monitored.
11. If you received a knee replacement, you may use a continuous passive motion machine to continuously bend and straighten the knee.
12. Your doctor may offer you pain medication to manage pain and help you move around with less discomfort.
13. You will receive an evaluation by a physical therapist.
14. You will receive a diet of clear liquids or soft foods, as tolerated.
15. You will begin postoperative activities taught during your postoperative visit.

Recovering from surgery

Although the recovery process varies for each patient, here's what you might expect in the days following surgery.

1. Your orthopaedic surgeon, nurses and physical therapist will closely monitor your condition and progress.
2. When you are medically stable, the physical therapist will recommend certain exercises for the affected joint.
3. To ease the discomfort the activity will initially cause, pain medication may be recommended by your doctor prior to therapy. If prescribed by your doctor, your pain medication will gradually be reduced, the IV will be removed, your diet will progress to solids and you will become increasingly mobile.
4. The physical therapist will discuss plans for rehabilitation following hospital discharge. Your physical therapist will also go over exercises to help improve your mobility.
5. Depending on your limitations, an occupational therapist may provide instruction on how to use certain devices that assist in performing daily activities, such as putting on socks, reaching for household items and bathing.
6. A case manager will discuss plans for your return home and will ensure that you have all the necessary help to support a successful recovery.

Tips for postoperative care

1. Call your surgeon to report or discuss any postoperative concerns.
2. Ask your doctor about how to care for the wound.
3. Ask your doctor about any unusual symptoms that you should look out for after surgery.

Frequently asked questions

Q: Am I too old for a joint replacement?

A. While age is an important factor in your health, age alone isn't usually a reason not to have joint replacement surgery. Your doctor will be more interested in your overall health and will consider a variety of things, such as blood test results, your physical strength, bone density, and diet and lifestyle, to determine whether joint replacement is right for you.

Q. What kinds of tests will I need before surgery?

A. Your doctor will likely request a physical checkup, routine blood work and a urine test. If you're over 50, or have a heart or respiratory issue, you may also need an EKG and a chest X-ray. Your doctor will recommend tests based on your specific diagnosis and medical condition.

Q. When will I be discharged from the hospital?

A. It depends on you, your recovery process, and your doctor's recommendation. Most people go home within one to four days after surgery.³

Q. After surgery, will the doctor talk to my family about how my surgery went?

A. Typically, your doctor or one of the assisting surgeons will come out to the waiting area to talk with your family as soon as you've been taken into the recovery room. If your family misses seeing the surgeon, they should contact the surgeon's office. Your doctor's office will arrange a time for your surgeon to discuss your surgery with your family.

Did you know?

Knee replacement patients may **return to driving** in **4-6 weeks**, or as determined by your surgeon.⁴



Did you know?

80% of osteoarthritis patients have some degree of **movement limitation**.⁵

The risk of **arthritis increases with age**, and arthritis is **more common among women** than men.⁶

Arthritis limits the activities of approximately **23.7 million adults**.⁷



Regular, sensible exercise may help your arthritis. Arthritic joints sometimes **need a period of rest** followed by a gradual return to activity. It's important to maintain your strength and range of motion in your joints.⁶

Patient testimonial

“Looking back, I cannot believe I waited so long...the Mako Total Hip replacement was a great choice for me.”

I am a mother of three and a grandmother of one. For 20 years, I was an operating room nurse, where I was on my feet all day. I was also physically active—biking, running and hiking.

The first time I experienced hip pain was after a race, and I didn't think anything of it. I thought it would go away, so I kept pushing myself at work and through my weekly exercise routine, but I found myself slowing down. My range of motion kept decreasing and I couldn't do the things I used to do. When I finally decided to speak to an orthopaedic specialist, it was too late. The arthritis had worn down the cartilage in my hip, creating bone-on-bone contact.

Looking back, I can't believe I waited so long. The Mako Total Hip replacement was a great choice for me. I feel better than I have in a long time and I'm back to some of the activities I love.

**– Carolyn Fahey
Mako Total Hip
recipient**

All surgery carries risk. See your orthopaedic surgeon to discuss your potential benefits and risks. Not all patients will have the same postoperative recovery and activity level. Individual results vary.



Important information

Joint replacements

General indications: Hip joint replacement is intended for use in individuals with joint disease resulting from degenerative and rheumatoid arthritis, avascular necrosis, fracture of the neck of the femur or functional deformity of the hip. Knee joint replacement is intended for use in individuals with joint disease resulting from degenerative, rheumatoid and post-traumatic arthritis, and for moderate deformity of the knee.

Contraindications: Joint replacement surgery is not appropriate for patients with certain types of infections, any mental or neuromuscular disorder which would create an unacceptable risk of prosthesis instability, prosthesis fixation failure or complications in postoperative care, compromised bone stock, skeletal immaturity, severe instability of the joint, or excessive body weight.

Common side effects of hip or knee replacement surgery: As with any surgery, joint replacement surgery has serious risks which include, but are not limited to pain, infection, bone fracture, change in the treated leg length (hip), joint stiffness, hip joint fusion, amputation, infection, bone fracture, change in the treated leg length (hip), joint stiffness, hip joint fusion, amputation, peripheral neuropathies (nerve damage), circulatory compromise (including deep vein thrombosis (blood clots in the legs), genitourinary disorders (including kidney failure), gastrointestinal disorders (including paralytic ileus (loss of intestinal digestive movement), vascular disorders (including thrombus (blood clots), blood loss, or changes in blood pressure or heart rhythm), bronchopulmonary disorders (including emboli, stroke or pneumonia), heart attack, and death.

Implant related risks which may lead to a revision of the implant include dislocation, loosening, fracture, nerve damage, heterotopic bone formation (abnormal bone growth in tissue), wear of the implant, metal and/or foreign body sensitivity, soft tissue imbalance, osteolysis (localized progressive bone loss), audible sounds during motion, reaction to particle debris, and reaction to metal ions (ALTR). Hip and knee implants may not provide the same feel or performance characteristics experienced with a normal healthy joint.

The information presented is for educational purposes only. Speak to your doctor to decide if joint replacement surgery is right for you. Individual results vary and not all patients will return to the same postoperative activity level. The lifetime of any joint replacement is limited and depends on several factors like patient weight and activity level. Your doctor will help counsel you about how strategies to potentially prolong the lifetime of the device, including not engaging in high-impact activities, such as running, as well as maintaining a healthy weight. It is important to closely follow your doctor's instructions regarding post-surgery activity, treatment and follow-up care. Ask your doctor if a joint replacement is right for you.

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GSNPS-PE-28_Rev-1_22272

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