Is Joint Replacement Surgery Right for You?

By William Scully III, M.D.

If your hip or knee arthritis has gotten to a point where it’s affecting your ability to enjoy your favorite activities, perhaps joint replacement surgery has crossed your mind. There are many things to consider before deciding on surgery. As a physician, I generally recommend joint replacement surgery in two situations:

- when conservative, nonoperative treatments have failed
- the arthritis is severe or end stage, which we refer to as bone-on-bone

Over-the-counter and prescription anti-inflammatory medication, weight loss, physical therapy, strengthening exercises, bracing and steroid or viscosupplementation injections are all nonsurgical measures that can be effective in many cases. I always remind my patients that a joint replacement is an elective procedure. There rarely is a situation when this procedure needs to be expedited. With very severe arthritis, however, the joint can start to develop a deformity that leads to bony destruction and loss of joint mobility that can complicate surgical treatment. In that instance, we would definitely encourage a patient not to wait any longer for surgery.

Once you’ve decided to proceed with surgery, you can expect to stay in the hospital for up to two days. For the right patient, same-day-discharge surgery can be done, but it takes a lot of planning ahead to make sure things are set up at home. On the same day as the surgery, patients will be able to walk and put weight on the operated limb or side while under the guidance of our physical therapy staff.

As you can imagine, no surgery is free of pain, but one of the most improved areas is pain management throughout the surgical experience, from admission to recovery. We address each patient’s pain from a variety of ways. We use different medications and methods to address the pain pathway, including a combination of preoperative pain medications, spinal anesthesia, nerve blocks and injections into the soft tissue around the joint replacement. All these measures in combination have played a big role in improving the patient experience and allowing for an accelerated recovery.

In terms of recovery, everyone’s different. A common mistake many patients make is to compare how they’re doing with others who have had the same operation. If a patient is severely debilitated before surgery, it’s going to take them longer to regain strength and get back to their normal functionality. Generally, a hip replacement patient recovers more quickly than one with a knee replacement and less overall physical therapy is required. A full recovery can range from a few months to a full year.

One of the best things you can do prior to deciding on surgery is to have a good discussion with your orthopaedic surgeon so that you can get all your questions answered. It’s also helpful to do some research before you see a surgeon so you have an idea of what the procedure and recovery entail. In general, being more educated on the topic is always a good thing.

Dr. William Scully III is a Cleveland native and a graduate of Georgetown University. He completed his orthopaedic residency at Madigan Army Medical Center in Tacoma, Washington, and afterward deployed to Afghanistan in support of Operation Enduring Freedom. Scully performed his fellowship in adult reconstruction orthopaedics at Cleveland Clinic Foundation. He specializes in hip and knee joint replacement surgery, with specialty training in anterior and minimally invasive posterior hip replacement, complex and revision hip and knee replacement surgery, and partial knee replacement surgery. Additionally, he has experience with knee and shoulder arthroscopic surgery, rotator cuff repair and shoulder labral repairs, as well as upper and lower extremity fracture management.