

MAKING Strides

Issue no: 29

Your free,
local health
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magazine
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Healthcare

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SPECIALIST TREATMENTS

at **THE MCINDOE CENTRE**

The McIndoe Centre in East Grinstead is home to some of the UK's most esteemed consultant plastic and reconstructive surgeons. Under one roof they form a multidisciplinary team.

As part of Horder Healthcare, we are committed to treating our

patients and each other with kindness, respect and dignity, resulting in life-changing outcomes. The satisfaction of our patients and the best possible outcomes for them are our priority.

**PLASTIC AND
RECONSTRUCTIVE
SURGERY**



**OPHTHALMIC
SURGERY**



**ORAL &
MAXILLOFACIAL
SURGERY**



Contact our helpline on
01342 488058
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The McIndoe Centre

HORDER HEALTHCARE

Holye Road, East Grinstead, RH19 3EB

Welcome



As an organisation that strives to provide outstanding healthcare, we know that there are many factors involved in delivering the best possible outcomes for our patients.

As a specialist provider of orthopaedics, plastic surgery and ophthalmology, we have always known that there is a direct relationship between specialisation and outcomes. At The Horder Centre, we undertake nearly 2000 hip and knee replacements a year, making us one of the largest single site orthopaedic providers in England. Similarly, The McIndoe Centre has one of the largest concentrations of plastic surgeons in the south-east of England

Over the last few years, there has been growing recognition of the relationship between high volume, specialist centres of excellence, and outstanding clinical outcomes. As a specialist provider, we are able to engage consultants, nurses and theatre staff who are experts in their field and we believe this has a direct impact on the quality of care we provide.

We were very pleased, therefore, when the NHS began to focus on the important role specialist providers play in the delivery of high quality healthcare. Most recently, the NHS has developed the 'Getting It Right First Time' (GIRFT) initiative. Under the leadership of Professor Tim Briggs, an orthopaedic

surgeon, the GIRFT programme has highlighted the direct relationship between high volumes, clinical outcomes and the important role of specialist providers.

Following discussions with Professor Briggs, we were delighted to be asked to pilot the GIRFT programme for the independent healthcare sector. Working with Professor Briggs and his team, we are helping to develop a programme that will both improve clinical outcomes and help patients to make informed choices about their healthcare provider.

Horder Healthcare has a proud history as a provider of high quality, specialist healthcare. Our work with Professor Briggs reflects our ongoing commitment to work in partnership with the NHS to improve healthcare outcomes for the wider community.

Dr Richard Tyler
CEO, Horder Healthcare

Our locations

Crowborough
Eastbourne
East Grinstead
Seaford

Horder Healthcare

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@The.McIndoe.Centre



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LATEST NEWS

Helping Hands in Sierra Leone

 www.horderhealthcare.co.uk/news-healthy-living/helping-hands-in-sierra-leone/

Horder Healthcare was delighted to support hand therapist Pascalle Smith when she recently joined an ongoing project in Sierra Leone, to help develop a hand surgery reconstruction unit. Money donated by the organisation was put towards providing teaching materials and splinting equipment for workshops and teaching on the programme.

Pascalle explains: "Since 2010, The British Society for Surgery of the Hand (BSSH) and ReSurge Africa have collaborated to develop the first reconstruction unit in the

country at the Holy Spirit Hospital, Makeni.

"In March this year, I was lucky to join the ongoing project. The visit aimed to provide an education programme to medical staff, therapists and nurses on improving care of patients with hand trauma. The team consisted of myself, a hand therapist, two orthopaedic consultants Steve Hodgson and Jonathan Jones and local reconstructive surgeon Abdulai Jalloh.

"Our visit consisted of an intense four days of teaching at three locations, teaching groups of 30-40 medical staff. As a day course the programme was an



Pascalle Smith, Horder Healthcare hand therapist

introduction and overview of upper limb trauma. We were encouraging education and the empowering of local medical staff to provide a future cascade of learning, mentoring and knowledge. This encourages a sustainable project for Sierra Leone to develop health care for the future.

"The visit was very beneficial and successful with the first Sierra Leone reconstruction unit opening in the next few months. In the future there is scope to further enhance collaborative, sustainable education and working in Sierra Leone."





The Horder Centre staff taking part in World Environment Day

Celebrating 5 years of Horder Healthcare Seaford

August marked the five year anniversary of Horder Healthcare's successful expansion of its outreach service in Seaford.

Horder Healthcare Seaford opened its doors in August 2014 to provide musculoskeletal healthcare services to local people. Over the years, the centre in Sutton Road has continued to grow and offer affordable physiotherapy, exercise classes clinically led by expert physiotherapists and both NHS and private consultant orthopaedic appointments.

Steve Daly, MSK Operations Manager at Horder Healthcare, explains: "During this time, the site has gone from strength to strength and has assisted with our charitable aim by significantly increasing the exposure of Horder Healthcare to many more people.

"From humble beginnings in 2014 with just one physiotherapist, a few classes and three consultant clinics per week, we now have nearly 12 physiotherapists seeing around 160 new patients per month with almost 450 people attending classes there each month.

"We now rent out space to five different local healthcare providers, including services that support memory, psychological wellbeing, ultrasound scans, pain management and neurosciences.

"It is clear that Horder Healthcare Seaford forms a very important part of our charity as it continues to grow and expose more and more people to our unique brand of healthcare."

WORLD ENVIRONMENT DAY

 www.horderhealthcare.co.uk/news-healthy-living/school-children-help-the-horder-centre-get-bee-aufiful-for-world-environment-day/

In support of World Environment Day on 5th June, we invited local Crowborough pupils from St John's primary school to help us create a new nature area at The Horder Centre.

The year 6 pupils were asked to help build bug hotels and sew 'bee bombs' of wild flowers into a new meadow that the hospital has created for the benefit of the local environment and also the wellbeing of patients recovering from surgery.

Guy Heasman, Head of Corporate Support Services said: "We are so grateful for all the help and enthusiasm from our helpers at St John's School. We hope the new area will not only become a haven for wildlife but will also create a therapeutic space for our patients, staff and visitors to enjoy."

Thirty Years of Surgery at The Horder Centre

Before surgery was introduced to The Horder Centre in 1989, it had been a medical centre and residential home for those suffering from arthritis. The introduction of surgery was a new concept.

Hip and knee replacement surgery had become firmly established in surgical practice by this time, but the ever increasing waiting time for both procedures in the NHS had become a national scandal. Patients were waiting two or three years for treatment, by which time their condition had deteriorated, pain had increased and many patients required more complex operations when surgery was eventually carried out.

In light of this challenging situation, Charles Gallannaugh, formerly a consultant orthopaedic surgeon in London and by now at Hastings, approached the management of The Horder Centre and the SE Thames Regional Health Authority to obtain support for a new initiative to establish The Horder Centre as an independent unit for joint replacement surgery. The independent charity would work alongside and in support of the NHS system to treat NHS patients under contract, a concept which was unconventional to say the least at that time and which remains so today.

The formal opening of the surgical department took place on 25th April 1990 by the then President, Her Royal Highness Princess Margaret Countess of Snowdon. However, the first operation had taken place on 28th September 1989 when Charles Gallannaugh carried out the first hip replacement operation in the new surgical unit. The patient, Mr Albert



Charles Gallannaugh, Horder Healthcare President, carried out the first hip replacement operation at The Horder Centre

Cheal, remained in hospital for the conventional 10 days, a length of stay which has been much reduced in length over recent years. At this time, the procedure itself lasted for approximately 90 minutes, taking in to account anaesthetic and recovery time. In the first year The Horder Centre treated 242 patients, and as the number of procedures increased, procedures other than joint replacement, such as arthroscopy of the knee, were introduced from June 1990. A new outpatient unit and seminar room were opened on 20th October 1993 by Princess Margaret and on this occasion she met Mr Fred Mountford, the one thousandth patient to receive a joint replacement at The Horder Centre.

By 1996, many patients throughout the country who had undergone joint replacement surgery in the early years began to experience

problems as wear and tear took their toll on the artificial prostheses. Revision surgery to renew these worn out joints led to the development of new and more complex operations. As many of these patients were referred to the Centre for treatment, new techniques and equipment were developed to meet this need. The Centre acquired an Orthosonic System to assist the surgeon when bone cement used at the primary operation had to be removed and new instruments specifically designed for revision surgery were acquired. When new techniques of bone grafting were developed, the Centre set up one of the first bone banks to collect bone from the femoral head of patients undergoing a primary hip replacement, bone which was previously discarded, so that it could be used to repair damaged bone found at revision surgery. It is of interest that when patients are asked to give their permission for their bone to be donated, many express the view that they are delighted their bone can be available to help others in this way. In 2012 the Centre received an award for its contribution to the Live Bone Donation Programme presented by the NHS Blood and Transplant Service.

By the dawn of the New Millennium, more than 6,000 major joint replacements and over 3,300 other orthopaedic operations had been carried out and it was clear the theatre suite and surgical wards were nearing the limit of their capacity. In 2002 a major appeal was launched to raise £2.5 million to pay for a new surgical wing and in 2003 a new twin theatre suite was opened. At the same time, extensive refurbishment of old outdated accommodation was carried out, providing many benefits for future patients.

In 2010, following a government initiative, a new contract 'Any Qualified Provider' was signed, making The Horder Centre the first independent healthcare provider in the South East to be awarded this new contract to treat NHS patients. This enabled the Centre to provide NHS services for orthopaedic surgery, pain services and rheumatology. In 2012, with consistently high outcomes, The Horder Centre was named as one of the country's best providers in an independent annual report by the Dr Foster Guide.

Today the Centre performs over 2,000 hip and knee replacements a year and offers a wide range of orthopaedic procedures and services. When last visited by the CQC the Centre was rated as outstanding.

“The formal opening of the surgical department took place on 25th April 1990 by the then President, Her Royal Highness Princess Margaret”



PATIENT STORY

Mary Ashbolt

After years of restrictive groin pain caused by osteoporosis, a sudden fall on concrete meant that Mary's hip pain became unmanageable and eventually resulted in both hips being replaced at The Horder Centre.

Mary explains: "I had previously worked with Mr Hugh Apthorp at my local Hastings hospital so knew of his expertise in hip replacement surgery. My mother had also undergone surgery at The Horder Centre and had an excellent experience so naturally I requested a referral straight away from my GP.

"I was immediately impressed by how all the staff knew my name. The surgery was very successful and I was pleased to be given the option of having a spinal anaesthetic rather than a general, which was my preference. Everyone

at the centre was so helpful, and they placed so much emphasis on getting out of bed as soon as possible and starting the exercises.

"I was particularly grateful to practise going up and down stairs, as I was concerned how I would manage these at home. Because of this, I felt so confident and prepared for life outside; I even stopped for a coffee on my way back from hospital!

"When I returned home I felt very reassured that the staff were only a phone call away for advice or reassurance. Within four weeks I was driving, and after seven weeks I completed a sponsored charity walk which I would never have been able to do prior to my surgery.

"The surgery by Mr Apthorp has made a terrific difference to my quality of life and I am so grateful to The Horder Centre for their fantastic patient care. If I lived closer to the centre I would definitely become a volunteer."

If you would like to share your patient story from one of our hospitals or clinics please send it to hh.marketing@horder.co.uk

Spinach, Ricotta & Roasted Butternut Tart

▶ www.horderhealthcare.co.uk/news-healthy-living/spinach-ricotta-and-roasted-butternut-tart/

INGREDIENTS (SERVES 8)

For the pastry:

250g plain flour
A pinch of salt
140g unsalted butter, diced, cold
40g Grana Padano, finely grated
1 large egg, separated
35ml water, ice cold

For the filling:

300g frozen spinach, defrosted, squeezed and chopped
250g ricotta
4 large eggs, beaten
100ml double cream
4 spring onions, finely chopped
25g parsley, chopped
25g dill, chopped
14g garlic, minced
salt and pepper
200g butternut squash, skinned, deseeded & roasted

HOW TO PREPARE

For the pastry

1. Place the flour, salt and butter in a large bowl and rub, using your finger tips, until

it resembles breadcrumbs and then stir in the cheese followed by the egg yolk. Add just enough iced water to bring the dough together but be careful not to over work. Wrap in cling film and allow to rest for a minimum of 30 minutes.

2. Grease a 25cm tart tin, then roll out the pastry to fit the tin and around 5mm thick. Transfer the pastry to the tin ensuring that all sides are firmly pressed in. Place in the freezer for 15 minutes to rest. Meanwhile preheat the oven to 190c.

3. Remove the tart case from the freezer and blind bake for 20 minutes. Remove from the oven, brush with the egg white and return to the oven for a further 10 minutes or until golden. When done, use a sharp knife to remove excess pastry.

For the filling

1. Place the spinach in a large bowl with the ricotta, eggs, cream & butternut. Mix well then add the spring onions, garlic, parsley and dill to the bowl, season and pour into the case until level.

2. Bake the tart for 35-45 minutes until set in the middle. Cover with foil half way through cooking to stop over colouring.

For more recipes, please visit our Healthy Living section at horderhealthcare.co.uk

Our brand new selection of Christmas cards for 2019



A At the Door



B Christmas Wreath



C Donkey Trio



D Flying Dove



E Glowing Christmas Tree



F Robin on Snowy Branch



G Three Kings



H We Three Sheep

All cards have the greeting:
"Wishing you a Merry Christmas and a Happy New Year"

Each year we offer a variety of Christmas cards for sale and with your continued generosity, you really do make a difference to our fundraising efforts. With your help we hope we can

increase our sales and raise even more funds than last year. We offer free postage and packaging - although any donations to cover the cost are greatly appreciated.

1. Select your Christmas cards

Card	No. in pack	Price	No. of packs	Total £
A At the Door	10	£3.50		
B Christmas Wreath	10	£3.50		
C Donkey Trio	10	£3.50		
D Flying Dove	10	£3.50		
E Glowing Christmas Tree	10	£3.50		
F Robin on Snowy Branch	10	£3.50		
G Three Kings	10	£3.50		
H We Three Sheep	10	£3.50		

Please make sure cheques or postal orders are made payable to '**Horder Healthcare**'.

Thank you for your order.

Total cost of order £

Donation for postage & packaging £

Total payment £

2. Your donation

I would like to support Horder Healthcare with a gift of:

£1,000
 £500
 £250
 £100
 £50
 Other £

I enclose a cheque/CAF voucher made payable to '**Horder Healthcare**'

YES, I am a UK taxpayer and consent to Horder Healthcare claiming Gift Aid on this and all my donations in the last four years and from the date of this declaration until I notify Horder Healthcare otherwise. I understand that if I pay less Income Tax and/or Capital Gains Tax than the amount of Gift Aid claimed on all my donations in that tax year it is my responsibility to pay any difference.

Please sign to confirm:

Date:

3. Your details (PLEASE USE CAPITALS)

Your details are only used for posting your Christmas cards or if we need to contact you about your order.

Name: *Mr/Mrs/Miss/Ms*

Tel:

Address:

Post code:

Email:

Send to: Marketing Department, Horder Healthcare, St. John's Road, Crowborough, East Sussex, TN6 1XP. Alternatively, you can email: fundraising@horder.co.uk or call **01892 665577**.

Visit horderhealthcare.co.uk to purchase Christmas cards online.

To receive marketing communications including Making Strides, please visit horderhealthcare.co.uk/opt-in or email hh.marketing@horder.co.uk

YOUR physiotherapy questions

Gemma Freeman, Extended Scope Practitioner,
answers your physiotherapy questions.



Q I have been told by my GP that I have tennis elbow but I have never played tennis before in my life! I have researched this condition but have come across a lot of conflicting advice. Can you advise me on what this condition actually is and what I can do to get rid of it please?

A Tennis elbow is a common diagnosis given to pain experienced in the elbow. Its true diagnosis is actually lateral epicondylitis, meaning inflammation of the outer side of the elbow. It is a condition common with, but certainly not limited to, tennis players due to the repetitive nature of the strain that they put on the muscles that insert on to the outer part of the elbow. If you repetitively use your wrist and hand in any activity or overuse the hand with activities you are not used to, you can certainly develop a 'tennis elbow'. Common treatments involve addressing the inflammation with ice,

rest, taping techniques and even some electrotherapy. However, if this condition persists it is useful to see your physiotherapist who will assess the underlying cause of your problem and set you some corrective exercises to stop the problem returning.





Q I have been told I have moderate osteoarthritis in my left knee and for the last six months it has hurt when I go on long walks. Would a knee support be useful to help me continue with my walking?

A Knee supports can offer some stability and increase your confidence. The guidelines for the management of knee arthritis suggest they can be useful in addition to other treatments, but there is nothing to suggest they are useful on their own. There are several factors that are more strongly supported in the management of arthritis, which are useful to know:

- It is really important in arthritis to strengthen the muscles around the joint, particularly in weight bearing joints such as the knee and hip, as well as to maintain overall fitness.

- Aerobic exercise (such as walking) is imperative to maintain your overall fitness of body systems such as heart, lungs, etc. Other good forms of exercise for painful weight bearing joints are cycling, swimming or aqua-aerobics.
- Supportive, well-cushioned footwear is ideal for shock absorption and improving the position of the foot, which reduces stress on the joints.
- Weight reduction and management are also important factors. Increased weight puts more stress through the joints, which may well increase the pain, particularly walking up stairs and hills.

Feel free to add knee guards to any or all of the treatments above. Many people find they help them feel more supported, or make the knee feel warmer, and there is no harm in using one.

Visit [horderhealthcare.co.uk](https://www.horderhealthcare.co.uk) to find out more about our physiotherapy services or call **01892 665577** to book an appointment. Please email your physiotherapy questions to info@horder.co.uk



The Horder Centre gets walking for thrombosis

The Horder Centre participated in National Thrombosis Week by encouraging staff to get their blood pumping for a team walk, to raise awareness of the potentially deadly condition.

Members of staff wore red to take part in the fun event at the Crowborough hospital to highlight the importance of keeping active to prevent blood clots. Patients and the public were also offered a wide range of information on thrombosis including symptoms and prevention.

The national awareness event which is celebrated around the country every May, aims to help increase the understanding of thrombosis. Also known as deep vein thrombosis (DVT), pulmonary embolism (PE) and venous thromboembolism (VTE), thrombosis is the formation of potentially deadly blood clots which can form in the artery or vein. This very common condition affects more than 60,000

people every year in the UK and the condition is the number one cause of preventable hospital deaths.

Clinical Services Manager Faye Biggs said: "It was great to see the team coming together to raise awareness of National Thrombosis Week with the walk and by information within the hospital to make more people aware of thrombosis and what they can do to help prevent any problems. As an Exemplar Centre, we take our role seriously of bringing to public attention the major negative impact of this non-infectious disease on global health."

The Horder Centre currently holds 'Exemplar' status, which is awarded by the National VTE Prevention Programme, for its commitment to significantly reduce the risk of venous blood clots occurring in patients.

How do you help prevent a venous blood clot occurring?

By understanding the risks and taking the necessary precautions we can keep the chances of developing a venous blood clot to a minimum. We take some important steps to keep patients safe to avoid venous blood clots but there are also some simple steps that the patient can do as well.



What can you do?

If your hospital admission has been planned, several weeks in advance:

- Keep a healthy weight and eat a balanced diet.
- Cut down – or try to stop - smoking.
- Talk to your doctor about your contraceptive or hormone replacement tablets. Your doctor may consider stopping them in the weeks before your operation.

When in hospital:

- Keep moving or walking; leg exercises are valuable. You will most likely be seen by a physiotherapist and be shown various leg exercises.
- Ask your doctor or nurse: 'What is being done to reduce my risk of venous blood clots?'
- Drink plenty of fluid to keep hydrated.
- Ask your anaesthetist to consider which type of anaesthesia is most appropriate for you.

Please note you are at risk for at least 12 weeks after you have been discharged from hospital, so continue to follow the precautions outlined above during this time.



Glaucoma Symptoms and Treatments: All You Need to Know

👉 www.themcindoecentre.co.uk/news-and-articles/articles/eyes/glaucoma-treatment-and-symptoms/

COMMON GLAUCOMA QUESTIONS ANSWERED: AN INTERVIEW WITH GOKULAN RATNARAJAN (CONSULTANT OPHTHALMIC SURGEON)

When people look online for any medical, surgical or illness-related information, it can often be quite daunting and sometimes even inaccurate. At The McIndoe Centre, one of our main priorities is to educate our patients on the procedures we perform. We believe that by doing this, our patients can become their own health advocates and develop a better understanding of our practices.

UNDERSTANDING THE DIFFERENT TYPES OF GLAUCOMA

While there are many different types of glaucoma, the symptoms remain very similar. It is also important that

patients are able to identify the different types in order to act accordingly.

Although **Open Angle Glaucoma** is the most common type of glaucoma, it is arguably the most dangerous because it usually goes unnoticed due to the slow-building symptoms. It is caused by your eye's drainage channels clogging up over time. You may have symptoms for years before you realise that your eyesight is deteriorating, which is why it's important to have your eyes tested once a year to ensure your eyes are in good health.

Acute Angle Closure Glaucoma is caused when the fluid in the eye suddenly

becomes blocked, which sees the pressure inside the eye rise at a dangerously fast rate. This less common type of glaucoma requires immediate medical attention due to how quickly it can impact your vision.

While glaucoma is usually associated with age, children are also at risk. Childhood glaucoma – otherwise known as **Congenital Glaucoma** – is caused by an abnormality of the eye. This is another rare type of glaucoma and is usually diagnosed within the first year of their life. One cause of congenital glaucoma might be due to the eye's drainage system failing to develop properly. In some cases, it can be inherited.

Secondary Glaucoma is the name given to any type of glaucoma where there's an identifiable underlying problem. For example, inflammation of the eye may cause secondary glaucoma.

WHAT CAUSES GLAUCOMA?

The most common cause is when pressure builds in the eye, meaning the fluid surrounding your eye has trouble draining properly. This means the pressure has nowhere to escape and this will eventually damage the optic nerve that connects the eye to the brain, which in turn, causes impaired vision and sometimes blindness.

The main problem surrounding glaucoma is that it still remains unclear what causes the build in pressure. However, there are certain factors that may increase the risk, such as heritage, prior medical conditions and age.

Frequent eye tests will ensure that you're kept up to date with the condition of your eyes and if a problem is found, treatment can begin right away.

TREATMENT: WHAT TO DO IF YOU HAVE GLAUCOMA

Diagnosing glaucoma early is very important, as it's not currently possible to repair or reverse the vision you've already lost. However, treatment is still an option after your diagnosis and it can

prevent you from suffering further vision impairment.

As mentioned previously, the way your treatment will be assessed depends on the type of glaucoma you have. The most common treatment options consist of eye drops, laser treatment and surgery. These treatments all help to:

- Reduce the build-up of pressure in your eyes
- Reduce fluid production in your eyes
- And open blocked drainage tubes to further reduce fluid build-up in your eyes.

It's strongly advised that if you have been diagnosed with glaucoma, regardless of the severity of the condition, you seek regular eye checks to ensure you're doing everything you can to monitor and track the progress of your treatment.

TESTING FOR GLAUCOMA

Fortunately, glaucoma is a condition that can be spotted during a routine eye check-up. This is why it is so important to visit your optician regularly. We recommend visiting your optician at least once a year (or more depending on your

current eye condition).

Routine checks are often quick and painless, usually involving simple vision tests and measurements of your eye pressure. If your optician finds that you may have developed glaucoma symptoms they will refer you to an eye specialist. The specialist will take you through the various treatment options available and ways you can prevent the condition from worsening.

WHEN TO CONTACT A DOCTOR

We advise that if you are experiencing any issues with your eyes, such as blurred or deteriorating vision, you should visit your optician or GP. However, having blurred vision is not a direct sign that you have glaucoma, it's simply a sign that you're due for a check-up just to ensure that there are no underlying problems. If you have experienced a sudden loss of vision without any obvious explanation, it's strongly advised that you visit the nearest A&E department, or eye casualty unit.

Mr Ratnarajan is a Consultant Ophthalmic Surgeon with The McIndoe Centre. Please call **01342 488058** or visit **themcindoecentre.co.uk** for further information or to arrange a consultation.



What Does A Knee Replacement Involve?

By Consultant Orthopaedic Surgeon Mr Sam Rajaratnam FRCS (Tr&Orth)

 www.horderhealthcare.co.uk/news-healthy-living/what-does-a-knee-replacement-involve/

Osteoarthritis of the knee is a very common cause of knee pain, the feeling of the knee 'giving way' and swelling.

Whilst conservative treatment including pain killers, steroid or cartilage protein injections and physiotherapy can be helpful in the early stages, most people with osteoarthritis of the knee will eventually require knee replacement surgery.

What does knee replacement surgery involve?

Knee replacement surgery has advanced tremendously over the last 30 years and is now one of the most successful operations performed throughout the world. The National Joint Registry recorded that 70,000 knee joint replacement procedures are performed in England annually. In years gone by, the replacement itself formed a hinge to the knee joint, but modern knee replacements are surface replacements only. They work by removing the arthritic surface of the knee and capping it with an artificial surface. It is custom fitted to the patients' anatomy by an expert surgeon.

Modern replacement design allows an excellent range of motion once the patient has fully recovered. Generally, a low dose spinal anaesthetic allows the patient to start moving their knee on the same day of the

joint replacement and start walking either on the same night or the next morning following surgery. Most patients are able to return home having been able to climb up and down a flight of stairs safely within a couple of days of their joint replacement. It is very important that the patient continues to exercise their knee after discharge home.

The Horder Centre is proud of achieving some of the best national results following knee replacement surgery each year, with extremely low rates of complications. The overall patient satisfaction rate of a joint replacement with a rapid recovery programme is in the region of 94%, with the majority of patients being able to walk long distances, play golf, cycle, swim and lead an active lifestyle and a life without pain.

Enhanced recovery programme

As techniques and processes have developed, expert centres throughout the UK have seen improved results of the modern knee replacement through the Enhanced Recovery Programme. The Horder Centre is a leader in enhanced recovery following knee replacement surgery and the best results are gained by careful surgery and a streamlined approach to the pre and postoperative rehabilitation.

The most important components of the Enhanced Recovery Programme are as follows:

- A comprehensive pre-operative meeting with a Consultant that specialises in knee surgery to help the patient understand the process.
- Excellent verbal and written information to ensure the patient is fully prepared
- Optimising the patients' health and fitness prior to surgery i.e. nutritional state, exercise programme and minimising any medical conditions.
- Use of high flexion knee implants during surgery.
- Care from an expert theatre team that implant hundreds of knee replacements annually with excellent results.
- Use of an advanced anaesthetic technique to optimise pain control after surgery. Local anaesthetic is used to infiltrate the tissues so that the patient is not in pain immediately after surgery.
- A co-ordinated post operative, early rehabilitation programme involving the surgeon, nurses, physiotherapists (using state-of-the-art gym facilities available at The Horder Centre).
- The most important factor in the enhanced recovery programme following a knee resurfacing/replacement procedure is a motivated patient who is keen to exercise their knee as this will achieve the best outcome following surgery.



Mr Rajaratnam is a Consultant Orthopaedic Surgeon with Horder Healthcare. Please call **01892 620938** or visit **horderhealthcare.co.uk** for further information or to arrange a consultation.

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FREE INFORMATION EVENTS
Please visit horderhealthcare.co.uk
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HIP & KNEE REPLACEMENT SPECIALISTS

The Horder Centre is a specialist centre of excellence for orthopaedic surgery. As a private patient, you can get faster access to a range of procedures including hip and knee replacement. To arrange a consultation or a tour of our specialist centre please:

call **01892 620938**

visit horderhealthcare.co.uk

Why choose The Horder Centre?

- ✓ Wide range of orthopaedic consultants
- ✓ Over 2000 joint replacements a year
- ✓ No need to wait for treatment*
- ✓ Recognised by most major insurers

*2 weeks from initial appointment providing the procedure is appropriate.
Terms & Conditions apply.
Subject to status.



The Horder Centre

HORDER HEALTHCARE

St John's Rd, Crowborough, East Sussex, TN6 1XP