

# A new knee needed – STAT!

## ER doctor has knee replacement surgery

The life of an emergency room doctor is rarely slow -- especially when you work in Iowa's second busiest ER.

Craig Hovda, MD, has worked in St. Luke's ER for over two decades. He's almost always on his feet caring for patients, ordering tests and diagnosing other people's emergencies.

Late last year he experienced his own emergency and sought advice from Sandeep Munjal, MD, an orthopaedic surgeon with Physicians' Clinic of Iowa, P.C., and a member of St. Luke's Human Motion team when he was forced to slow down because of extreme pain in his right knee.

"I've had issues with that knee for some time," said Dr. Hovda. "In my 40s



Sandeep Munjal, MD  
orthopaedic surgeon  
Physicians' Clinic of Iowa, P.C.

I had torn cartilage and up until that point I had been a runner, enjoyed tennis and played football in college. I was fortunate I never had any serious injuries. After tearing the cartilage I had a knee scope and the doctor determined it was more serious

than first thought. There wasn't much cartilage left in that knee, it was bone-on-bone. I was upset because I like to stay active and that meant I was limited to only biking and golfing."

Eventually the pain worsened and soon after the knee scope Dr. Hovda had an osteotomy, which is a surgical procedure

that involves bone-cutting. The surgeon removes a wedge of bone located near the damaged joint. The procedure is supposed to cause a shift of weight from the area where there is cartilage damage to an area where there is more normal or healthy cartilage.

"At the time, I decided this was my best option because I was still young for a total knee replacement," said Dr. Hovda. "Unfortunately the procedure didn't give me the results I hoped for and I struggled for five more years with significant pain."

"Obviously since Craig is a doctor he is not a typical patient for me," said Dr. Munjal. "He already knew the pros and cons of total knee replacement and what the surgery would entail. I knew he was in a significant amount of pain and had exhausted other treatment options. It was determined his next course of action to relieve pain was a total knee replacement."

St. Luke's Human Motion takes a unique approach to patient care -- focusing on the continuum of care and concentrating on the patient experience from the time a patient schedules joint replacement surgery through education, surgery, recovery and therapy.

According to the American Academy of Orthopaedic Surgeons (AAOS) approximately 300,000 knee replacements are performed each year in the United States and as baby boomers age and want to stay active that number is expected to increase. In fact, approxi-

mately 10 million adults in the United States are estimated to have symptomatic osteoarthritis of the knee.

### Causes of knee pain

The most common cause of chronic knee pain and disability is arthritis. Osteoarthritis, rheumatoid arthritis and traumatic arthritis are the most common forms. Osteoarthritis is when the cartilage that cushions the bones of the knee rub against one another, causing knee pain. Rheumatoid arthritis is a disease involving chronic inflammation, which can damage the cartilage and traumatic arthritis can follow a serious knee injury.

"Craig had osteoarthritis," said Dr. Munjal. "Once I determine surgery is the logical next step -- it is pretty much up to the patient to determine when they can no longer tolerate the pain to the point where it's affecting their quality of life."

In his early 50s Dr. Hovda wanted to wait as long as possible before going ahead with knee replacement surgery.

### Improved joints

According to AAOS most hip and knee replacement procedures will perform well for the remainder of the patient's life. Current hip and knee replacements are expected to function at least 15 to 20 years in 90 percent of patients.

"The life of a hip or knee replacement varies from patient-to-patient," said Dr. Munjal. "There are many factors that determine how long they last -- one in particular is patient activity."

"I decided I couldn't tolerate the pain any longer," said Dr. Hovda. "It was impacting my ability to get around. I scheduled knee replacement surgery for mid-December."

Hovda worked his regular shift in St. Luke's Emergency Department and when he was done walked up to Surgi-Care for surgery. Following surgery each St. Luke's patient enjoys a private room.

"The nurses were wonderful," said Dr. Hovda. "They got me up and walking not long after surgery and I started doing physical therapy (PT) right away, which is very important for recovery."

Dr. Hovda had surgery on a Friday and was discharged from St. Luke's on Sunday morning.

### Rapid recovery

Every patient's recovery is different, but most patients are discharged from the hospital in one to three days following knee replacement surgery and feel better within six to eight weeks.

Computer-assisted surgery and pain medicine injections are making total knee replacement easier on patients -- allowing them to get moving sooner.

"A surgical navigation system helps me align and orient the knee implants with the patient's anatomy," said Dr. Munjal. "It provides measurements to give the patient's new knee the best strength, stability and range of movement."

A week after surgery, Dr. Hovda was back at St. Luke's ER caring for patients. He used crutches and took appropriate breaks to ice his knee and elevate it.



"I see and feel a significant difference in my right knee. I have five children and we like to hike, bike and ski. I decided why put off this surgery any longer -- you only live once and now I'm looking forward to being as active as possible with my kids again."

■ To learn more about St. Luke's Human Motion or to view a video of total knee replacement surgery log on to [stlukescr.org](http://stlukescr.org).

Dr. Hovda returned to his job in St. Luke's ER a week after surgery.

St. Luke's Human Motion services:

- Spine Care
- Joint Care
- Sports Medicine
- Therapy Plus