

1. Benefits of Hip Replacement Surgery for Young and Old Patients

Short Description

Hip Replacement Surgery

Main Content

Hip problems are very complex & confusing situation for the patients. Hip problem may arise in younger age like AVN due to excess use of steroid, alcohol, or it may be due to some trauma or injury.

And Hip problems are also seen in old patients very commonly due to fracture neck femur because of decrease bone density and also due to OA.

In both class of patients hip joint treatment becomes crucial.

If you see a young person having AVN in hip joint he has to perform many daily routine activities like routine work, exercise, official work, job etc., and if you see an old person they also need mobility in their life to keep themselves active and self-dependent instead of depending on family members for daily work.

So for both class of patients hip joint problem is essential to treat with best option.

Let's understand how our expert & experience skilled doctor treat it and considered as best hip replacement surgeon in Jaipur.

Our center is completely dedicated for such cases where we have full medical back up to treat all type of complex situations. We have pain control management team to take care specifically pain management part.

Our expert physiotherapy dept. helps our patients to stand and walk right from second day of operation.

With a dedicated team of arthroplasty experts our surgeon Dr. B R Bagaria is trained in UK US, Germany, and Hong Kong to do all type of primary, complex primary & revision hip replacement surgeries.

He has vast experience of using World class techniques to give best results to our patients.

If you go through the scientific data related to infection rate which is 3-4% internationally our records are better just 0.3% comparing to international standards.

Our modular operation theatre complex, separate joint replacement units for post op patients and quality control protocol helps to achieve desirable results .Our center also offers complete variety of implant to different age group patients based on their needs.

We have successful proven track of 7000+ surgeries which makes us best hip replacement surgeon in Jaipur.

2. Who Is Ideal Candidate For Knee Replacement Surgery??

Short Description

In routine when patient comes on OPD with complaint of knee pain, swelling, deformity from long time with depend on pain killers. Many patients complaint about back pain due to mall alignment of knees.

For such patient we do radiology evaluation ,grade 3 & 4 arthritis category with above complaints is considerable for knee replacement but after systemic evaluation the patient must be infection free, no neurovascular gross deficiency , no muscles pathology & with optimum function of heart, kidney & liver is than suggested for knee replacement.

Main Content

Routine work up before joint replacement

- clinical Details
- physical examination
- Radiological evaluation
- pre Anesthetic checkup
- evaluation by physician
- after clearance from all then patient enrolled for surgery

3. Dedicated Joint Replacement Centres!

Joint replacement centres are combination of expert surgeon team, Trained & expert medical staff, well equipped OR complex, best pain management team with advance devices, Post op care in high dependency units & joint replacement wing with expert rehabilitation team. These centres are supported by strong medical back up like critical care, cardiovascular, physicians, neuroscience and Nephrology departments. So with strict surgical protocol produces fast recovery especially in very elderly patients with multiple co morbidities and keep patients happy.

4. Role of Biologics in Early Osteoarthritis Knee!

Short Description

The use of biologics to treat certain conditions of tendons, ligaments, cartilage and bones is coming to the forefront of mainstream medicine. Biologic injections may include concentrated amounts of plasma, platelets and stem cells using strong defense systems. Osteoarthritis is a condition that can be treated by biologic injections. This condition is the genetic or traumatic degradation of the cartilage covering the ends of the bones. It can cause pain, joint swelling, joint stiffness and decreased function.

One example of a biologic injection is platelet rich plasma (PRP). Plasma is a component of blood that contains platelets, growth factors and inflammatory mediators. It is a natural source of growth factors involved in the stages of healing. The platelet cells are used for hemostasis, healing promotion and the recruitment other reparative cells. Research has focused on the role PRP and other biologics play in treating osteoarthritis. The early research results for the treatment of osteoarthritis have shown positive results equivalent to or more than other treatment options for longer durations. This treatment is being used worldwide.

PRP is a high concentration of plasma and is obtained by standard process blood draw from the patient. The blood is then spun down in a centrifuge to separate its contents. A kit containing a special syringe is used to withdraw only the plasma concentrate needed for treatment. This concentrate is then injected into the patient's joint and the entire process is completed in one visit. Since the source of the blood is from the individual, there is not a risk of rejection or transmission of disease. With any injection, there is a risk of injection site irritation or infection, but these risks are low and complications are rare.

A second type of biologic injection for the treatment of osteoarthritis is stem cell therapy. Stem cells can be harvested from the patient or from a donor. The most common site of harvest to treat an osteoarthritic patient in an outpatient or clinical setting is the patient's bone or adipose (fat) tissue. The typical area from which bone is harvested is the iliac crest in the pelvis, which can either be retrieved under local anesthetic or sedation prior to surgery of the area being treated. The risk of injection of stem cells is also low, but may come with temporary pain at the harvest site. Other healing factor sources that are more readily available are being researched for possible future treatment.

In day to today practice we are using these therapies in selected patients with early and moderate osteoarthritis grade 2&3 of knee joint but not use in advanced and inflammatory type knee arthritis.

Schedule for three prp injection one for each month for three months & only 30- 40 % patients get relief. This is not confirm treatment so prior counselling is mandatory.

5. Knee Replacement Is Painless Surgery!

Short Description

With the time things have changed long back knee replacement patients used to cry due to pain. But scenario is changed now.

Pain management team is part of advanced joint replacement centres with advance level devices (epidural, nerve block machine, digital epidural device) for pain control. They give epidural anesthesia, Nerve blocks, cocktail regime or give as per patient requirement so patient becomes pain free during the surgery and after the surgery.

With round the clock monitoring, patient can start walking on same day or next morning.

Benefit of this pain control give early mobilization of patient which further reduce chance of DVT, PE and other complications related to elderly age and also quick movements of knee joint with fast rehabilitation. Now a days we can say knee replacement is painless surgery.

6. Why Knee Replacement Protocol Is Strict!

Short Description

Why a joint replacement surgery is usually not performed in every hospital, this is because

Its complications are truly harassing for both patient as well as for surgeons.

The most common cause of TKR failure is infection .To avoid infection a centre must have a dedicated OR complex to be used only for joint replacement surgery. A very strict multilayer sterilization process from CSSD dept. to OR complex.

Why we say TKR protocol is strict because it starts from patient selection and goes up to month post-surgery.

Any leucina in this process be it patient selection or sterilization or post op rehabilitation then results will be surely compromised.

Responsibility of a successful result depend on both team and on patient.

7. Value of Technology in Tkr

Short Description

Recent introduction of techniques in total knee replacement is an additional tool to help surgeon. It's never ever a replacement of a surgeon's hand or his expertise.

Tools like navigation, Patient specific & Robotic arm is helping a surgeon to produce precise results more specifically in extra articular deformities of the leg.

All these tools have their limitations of knee balancing which is the main key of successful soft tissue alignment in TKR surgery.

A surgeon's hand is the only tool for surgery results apart from these techniques which are just helping hand not the surgeon's alternative.

8. Impact of Post-Surgery Care in Knee Replacement

Short Description

Knee replacement surgery is done to make patient walk and to give optimum function.

Even if surgery is done with fine technique and with full of experts team but if post op care is not good than all work will be waste.

Patient must achieve complete range of motion in certain time after the surgery & this is achieved with combined efforts of physiotherapy team, patients attended and by patient himself.

Apart from surgery related parameters if patient have other medical problems than that must be treated with your doctor's advice without any delay. Else patient will get ill and his/her motion will again be restricted or lost. We need to understand the post op care is a part of strict TKR protocol.

9. Can Tkr Patient Play??

Short Description

Knee replacement surgeries are done in high ageing like 60+.

These categories of patients don't require high demanding activities.

Their age related requirements are completely full filled by post TKR.

In higher age patients don't want jerky motions or want to play hard games like cricket, football etc. but

If they want to play some games like golf, swimming, soft cycling, any indoor games or unlimited walk if feel comfortable then that can be done easily without any problem.

10. Don't Get Infection In Tkr!

Short Description

A patient make sure that he or she don't let infection happens. Because infection is a very rare complication but if happens than very horrible for patient and for doctor to treat.

In TKR patient if infection enters into joint than bacteria make a bio film on prosthesis which is very difficult to treat. These kind of infection can happen by two times once during the procedure and second is in routine days.

First infection can be prevented by strict surgery protocol but secondary infection can happen at any time life.

We know elderly patients have associated comorbidities like Diabetes, Urinary Infection, Cardiac Problems, URTI, Poor Immunity & many type of other skin diseases.

Whenever these diseases flayer and patient become negligent than infection spread in body immediately.

For example patients with Urinary infection and uncontrolled diabetes with not treated on time can create sepsis.

So patient has to be aware and go for regular check up with their physician.

11. Avoid! To Protect Replaced Joint by Trauma

Short Description

Post TKR our strict advice to all patients is not to fall in any condition.

Routinely majority of patients in knee replacement are old age & associated with lot of other comorbidities like hyper tension, diabetes, vertigo, neurological problems, Parkinson, muscles weakness and fatigue syndrome.

Any linked disease can be cause for a patient to fall .Usually all patients are instructed to walk on plain surface and avoid higher steps and uneven surfaces .Post TKR patients also avoid hilly area, jumping, running and hard working. If post TKR patient falls than it causes per prosthetic fracture or fracture around hip joint,

These conditions are treatable but may causes long time bed ridden which is link with other systemic complications.

Our advice in this situation to patient that they should keep stick or any other support to avoid fall.

12. How Long Knee Replacement Run!

Short Description

Longevity of the TKR depends on the multiple factors but as per registry data the survivorship of knee arthroplasty is 95% up to 15 years.

It depends on patient factor like body weight, bone quality, use of implant in daily routine life,

In surgical prospective how the surgery is done, component placement, surgeon skill and finally implant type.

Today various categories of implants are available like CoCr, TiNbn, Coated knee, Hi-Flex design knees

All these are best in quality.

Its patient choice what they want to be replaced.