



Knee Pain after Joint Replacement

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Editorial

Total Knee and Hip Arthroplasties (TKA, THA) were major advances made in the field of orthopedics during the 20th century. However, in TKAs, we sometimes encounter knee pain after replacement [1]. Excluding obvious problems such as instability, infection, loosening, periprosthetic fracture, malalignment of the implants, under- or over sizing, or impingement [2,3], as surgeons, we believe that no pathology is occurring in the painful knee. We treat such patients superficially, following them with the usual schedule in the outpatient clinic; once a year or once a half-year follow-up may keep the patients away and lower the surgeon's stress from hearing patients' complaints.

However, insertion tendinopathy [4] may be an important issue. Many patients with such pain show tenderness on the insertions, such as the patellar tendon, collateral ligaments, pes anserinus, or iliotibial tract. However, this pathology is not considered often enough. Ultrasound is a very helpful diagnostic tool (Figure 1), but it is rarely used [5]. When faced with unhappy patients, we should perform a physical examination and ultrasound. This approach may help patients' broken hearts and ameliorate knee pain.

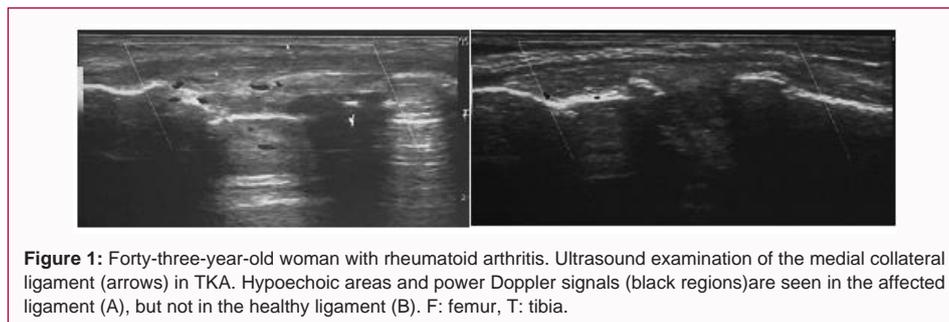


Figure 1: Forty-three-year-old woman with rheumatoid arthritis. Ultrasound examination of the medial collateral ligament (arrows) in TKA. Hypochoic areas and power Doppler signals (black regions) are seen in the affected ligament (A), but not in the healthy ligament (B). F: femur, T: tibia.

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