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**REVISION INTERVENTION**  
FOR PAINFUL KNEE REPLACEMENT

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## SYMPTOMS

You have had a partial or total knee replacement. Contrary to expectations, after several months, you are still not pain free. Your knee is stiff, unstable and/or painful. You would like to be physically active, would like to hike or ride a bike, but these weight-bearing activities are currently unthinkable for you. A problem could also be that you have increased pain again after a few good years with the prosthesis. If one of these descriptions fits you and your knee joint, then it is probably a good idea to think about a second opinion. We can possibly help you with a sophisticated clarification system and the necessary experience.

## EXAMINATION

It is important for us to do a detailed examination. It is crucial to differentiate between stiffness, pain and/or stability problems.

### **If pain is the focus, the following causes are common:**

- The original cause of your knee pain was not in the knee joint.
- The back surface of your knee cap was not treated with a prosthetic component.
- The knee prosthesis has loosened.
- There is a low-grade infection.
- The bio-mechanics of your knee ligaments were adversely changed during the operation.
- In the case of a partial prosthesis, osteoarthritis has affected the entire joint.

### **If the focus is on instability, the following causes are common:**

- The polyethylene chosen was too thin.
- An additional ligament injury has occurred.
- The prosthesis chosen was too small.
- Polyethylene abrasion resulted in bone softening, followed by prosthesis loosening; you feel this as instability or pain.
- An injury to muscles, tendons or nerves has occurred.

### **If stiffness is paramount, the following causes are possible:**

- Pain after the operation resulted in delayed build-up of mobility. Your knee joint became stiff as a result of increased scarring.
- The prosthesis components are too big.
- Disruptive bone structures were not removed or have grown back.



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### LEGEND

In this loosened total knee prosthesis, x-rays show large areas which are lighter in the bone due to the polyethylene abrasion, so-called osteolysis zones (arrow marked)

1 X-ray right knee front view

2 X-ray right knee lateral view

A thorough physical examination is fundamentally important, established and expanded upon by specialized imaging procedures (X-ray, possibly CT or SPECT/CT). It is crucial that we prepare a precise treatment plan tailored to you, before the revision procedure.

### PROCEDURE

Depending on the result of our clarifications/checks, various revision interventions are conceivable. It is always important that we have first ruled out a low-grade infection.

If so, and if we have identified a clear problem, a revision operation may be appropriate.



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### LEGEND

X-rays after changing to a revision prosthesis

3 Right knee front view

4 Right knee lateral view

## LIKELIHOOD OF SUCCESS

There are classic problems and combinations of problems that we see again and again. Of course, the likelihood of success for these problems is also relatively predictable. We are very aware that revision procedures are riskier and show fewer good results than the initial surgery. It is, therefore, all the more important to have a precise clarification before the revision operation.

Since long-standing pain often plays a decisive role, we are dependent on a well-functioning network of co-treating specialists. Above all, we trust

- especially competent and interested physiotherapists
- experienced and pragmatic pain therapists.

Thanks to this teamwork, we can achieve good results even with complex knee problems.

If you have any questions after you leave, please contact us at

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