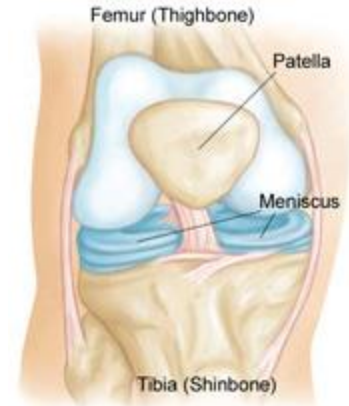


Medial and Lateral Meniscus Tears

- There is a medial meniscus (located on the inside of the knee) and lateral meniscus (located on the outside of your knee) in your knee. The menisci are a thick, fibrocartilage structure that are attached to the tibial plateau (top of the shin bone). They act as shock absorbers and are a secondary stabilizer in your knee.
- Meniscus tears can vary in terms of size, severity, location, tear pattern. Tears can be acute or degenerative and complete or incomplete.
- An acute meniscus tear can happen while participating in sports (i.e. when knee is suddenly twisted while the foot is planted on the ground) or while walking down the road.
- Symptoms can range from moderate to severe pain, swelling, inability to bend or straighten the knee, difficulty walking and pain over the medial and/or lateral joint line. In some cases, a piece of meniscus can become loose and get stuck in the knee. This can cause the knee to lock preventing the knee from fully extending.
- A meniscus tear may require surgery when the tear causes symptoms such as pain, swelling, catching, or locking and negatively affects your life and the activities you enjoy. A meniscus tear that is associated with a knee injury (i.e. a meniscus tear along with an ACL tear).



Diagnosing a meniscus tear

- A MRI is often used to diagnose a meniscus tear. A MRI is accurate in identifying if the meniscus has been torn and the severity of the tear. However, meniscus tears are not always definite on the MRI. The accuracy of MRIs with meniscus tears are not 100%.
- When determining the treatment for a meniscus tear, multiple factors come into play: activity level, age, location of the tear, amount of osteoarthritis in the knee, etc.

Surgery

- Meniscus repair - This is performed if the meniscus tear pattern is able to be repaired. Some meniscus tears are unable to be repaired. Age, activity level, arthritic changes and most importantly, if the meniscus tear pattern is amenable to repair, are considered when repairing a meniscus tear. A meniscus repair can be performed arthroscopic or through

an open incision. There are arthroscopic devices currently that may be used to repair a meniscus tear.

- Arthroscopic partial meniscectomy - Meniscus tears that are not amenable to repair may need a partial meniscectomy. The entire meniscus is NOT removed. Only the torn meniscus portion is removed in order to get the knee functioning normally and resolve the source of knee pain. If the entire meniscus is removed, the rest of the knee joint gets overloaded and therefore can become susceptible to advanced osteoarthritis.
- The final decision on meniscus repair vs a partial meniscectomy is made during arthroscopic surgery when the tear is evaluated. Tears in the outer third of the meniscus are often repaired (this is the red-red zone of the meniscus). This zone of the meniscus has a better blood supply for healing. Meniscus tears in the inner third (white-white zone) of the meniscus often require a partial meniscectomy because of the poor blood supply, which limits healing. The inner portion of the meniscus (white-white zone) is the thinnest section of the meniscus, therefore, removing a torn portion of the meniscus in this zone will have a minimal loss of meniscal tissue. There is the middle third of the meniscus (red-white zone) which has good blood supply

Meniscus healing

- Small tears in the meniscus that are not dislodged may heal, or may eventually be symptom-free. Larger tears that displace, and tears associated with instability, are less likely to heal. Tears in the outer 1/3 of the meniscus are more likely to heal than tears toward the inside of the meniscus because the blood supply is better in the outer region.

Sports/Work after meniscus surgery

- Returning to sports and/or work will depend on the extent of damage, procedure performed on your knee and your sport or work demands. For most patients, return to sports after a partial meniscectomy is one to two months after your surgery. You can return to a clerical job after a partial meniscectomy in about one week. This is not an absolute time frame. Every patient is different, progresses in the recovery process differently and will be determined on a case by case basis. If a meniscus repair was performed, clearance to resume sports activities or a physical demanding job may be 5-6 months after surgery. Return to work or sports will be discussed at your post-op visits.

