

HEALTH MATTERS

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Partial Arthroplasty for Arthritis of the Knee

By: Dr. Timothy Morton, Forward Orthopedics



Over ten million Americans suffer from some form of arthritis of the knee. Most of these people are over 45 years of age, with a peak incidence in the 60-75 year age group. Arthritis

is defined as a breakdown of the smooth material at the ends of bones, called cartilage. This cartilage degradation results in an uneven joint surface and causes pain and decreased motion. The most common type of arthritis is osteoarthritis. Osteoarthritis is usually the result of wear and tear over a period of time. It often has a hereditary component, as well. Other common forms of arthritis include rheumatoid arthritis and post-traumatic arthritis.

The symptoms of knee arthritis are pain, swelling, decreased motion, and progressive deformity. There is usually some limitation in activity due to some or all of these symptoms.

Initial treatment is usually conservative. Activity reduction, medication, and walking aids are all means to alleviate the pain in the knee. When the pain and disability become too severe to treat with non-surgical means, a joint

replacement, or arthroplasty, may be necessary.

From an orthopedic standpoint, the knee is divided into three sections, or compartments. The part of the knee where the thigh bone (femur) and the lower leg bone (tibia) come together forms two. The inner half is the medial compartment and the outer half is the lateral compartment. The third compartment is formed where the kneecap (patella) crosses across the front of the femur. Traditional knee replacement involves resurfacing all three of these compartments. The damaged ends of the bone are shaved to allow placement of prosthetic metal caps. A plastic spacer acts as a smooth gliding surface between the metal components. A small plastic button is secured to the under surface of the patella to complete the total knee.

In approximately one third of the cases of knee arthritis, only one of the compartments has enough damage to warrant arthroplasty. In these cases, the pain and deformity are more localized, but no less disabling. The medial component is most commonly affected, followed by the patella-femoral joint. In these cases of limited arthritic damage, partial knee arthroplasty may

be indicated. This involves resurfacing only the compartment that is arthritic. These devices are smaller and can be done through smaller, less-invasive operations. The hospitalization and recovery are generally much shorter than those seen in total joint replacements. It should be emphasized that partial knee arthroplasty requires the arthritis to be isolated to one part of the knee.

As more Americans are living and staying active longer, having surgical options that match their specific health problem will become more important. Partial joint replacement is one way in which that need is being met.

Dr. Morton sees patients at Hartford Clinic and Community Memorial Hospital in Menomonee Falls. For more information on Dr. Morton or to schedule an appointment, call 262-670-4824 (Hartford) or 262-257-5860 (Menomonee Falls).

Health Matters Now Online !!

Health Matters can now be viewed online at westbendclinic.com. Here you will find the current issue, along with past issues.

Jackson Clinic Expansion Nears Completion

Work continues on the Jackson Clinic expansion, which began in August 2009. Most exterior work has been completed and the crew from CG Schmidt have begun to work on the interior, where additional exam rooms are being added.

Medical services that will be provided at Jackson Clinic include family practice, preventive medicine, gynecology/women's health, orthopedics, on-site lab, radiology, and EKG services. The expansion will add 7,200 sq ft. to the current site. When complete, Jackson Clinic will be 17,600 square feet and feature 24 exam rooms, 8 physician offices, procedure rooms, an EKG room, laboratory and x-ray.

"The expansion of our Jackson Clinic will offer Jackson residents and surrounding areas greater access to care in their own neighborhood," said Gregory Blommel, MD, president and medical director of West Bend Clinic. "To better serve the growing Jackson community, it was evident there was a need for expansion of space and services."

The expansion project is expected to be completed by July 2010. The Jackson Clinic is located at W225 N16711 Cedar Park Court, just west of Hwy 45/60 interchange. Jackson Clinic is open from 8 am - 8 pm Monday - Thursday and from 8 am - 6 pm on Fridays.

For more information on the Jackson Clinic and the providers who practice there visit westbendclinic.com or call 262-677-1101.



Rendering with completed renovations. Expected July 2010.

Welcome Julie Parve, DNP, FNP-BC



We are pleased to announce the arrival of Julie Parve to the Kewaskum Clinic.

"I enjoy educating patients regarding preventive care, understanding acute and chronic disease management, assisting them in taking an active role in their care and keeping the lines of communication open and honest," said Julie.

Julie received her Bachelor's Degree in Nursing from Marion College in Fond du Lac and Master's and Doctorate in Nursing from Concordia University in Mequon. She is board-certified as a Family Practice Nurse Practitioner and a member of the American Academy of Nurse Practitioners.

Julie provides care for patients of all ages. Her special interests include childhood obesity, women's health and travel medicine.

For more information or to schedule an appointment please call 262-626-4616 or visit westbendclinic.com.

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