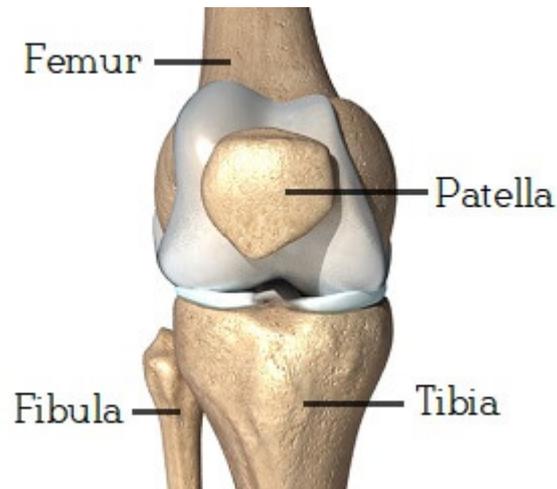


Knee pain



The knee joint is where the thigh and shin bones meet. The end of each bone is covered with a smooth cover called articular cartilage, which allows the ends of the bones to move against each other almost without friction. The knee joint has two extra pieces of cartilage called menisci, which are the shock absorbers within the knee.

The knee joint is held in place by four large ligaments. These are thick, strong bands which run within or just outside the joint capsule. Together with the capsule, the ligaments prevent the bones moving in the wrong directions or dislocating. The thigh muscles (quadriceps) also help to hold the knee joint in place.

What causes knee pain?

There are many different causes of knee pain. A common cause is osteoarthritis, a condition that affects the body's joints. The surfaces within the joint become worn and thin so the joint doesn't move as smoothly as it should. This then can give you pain.

The information and exercises here will be relevant for most cases.

Medication

There are a number of different tablets and creams available. Painkillers such as Paracetamol and Ibuprofen may help which can be brought over the counter in most shops and pharmacies. It is important that you take them as described on the packet regularly and at the recommended dose to help you control the pain whilst allowing you to continue exercising. Don't wait until your pain is severe before taking painkillers. You shouldn't take Ibuprofen or Aspirin if you're pregnant, have asthma, indigestion or an ulcer until you've checked with your doctor or pharmacist. Medication can have side effects so you should read the label carefully and check with your pharmacist if you have any queries. If over-the-counter medication doesn't work, your doctor may prescribe stronger painkillers or cream, which you can rub directly onto the knee.

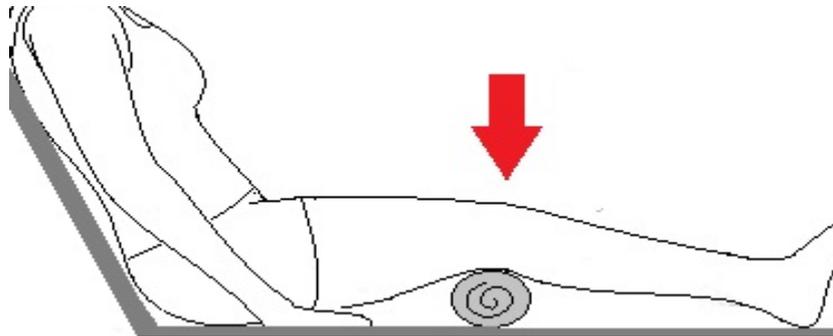
Physiotherapy

If your knee pain is affecting your activity and is persisting, you can self-refer online to your local physiotherapy department. Physiotherapy can help you to manage pain and improve your strength and mobility.

What can I do to help myself?

- lose weight (if you're overweight) as this directly increases the amount of pain you will be in.
- exercise – low-impact activities such as walking swimming and cycling.

Doing simple inner range quadriceps exercises are excellent as it helps to keep the knee straight, encourages swelling to go down and helps the body to keep its muscle.



Firstly sit with your back properly supported, put a rolled up towel behind the back of the knee. Push your knee down into the towel. Then bring your foot up to 90 degrees. Next tighten the muscle at the front of the knee so your heel lifts off and then try and lift your whole leg up and off the towel. Hold it for a few seconds and then lower down.

The NHS website have an excellent online exercise programme linked into arthritis research UK.

<https://www.versusarthritis.org/about-arthritis/managing-symptoms/exercise/>

Treatment for knee pain

Exercises and painkillers

Sadly there is no quick fix to arthritis in your knee. Also the knees you were born with in 99.9% of the population are the best knees you will ever have. A knee replacement feels like the easiest option but 1 in 10 people statistically are disappointed with the outcome of their surgery. That means that you and 9 friends in one room, all of which had had the operation to give you a new knee, one will say they regret having had it done. Therefore it should not be considered as the easiest or best option. You want to keep your knees for as long as possible. You can do this by losing weight, taking regular medication and modifying your lifestyle. All the evidence shows that the more active and mobile you are the better the outcome.

You should not be prescribed opiate medication without serious consideration. If used long term the medication gets less effective. It is then very hard to control your pain for any ailment you may experience.

X ray

An X-ray is used to determine the size of the joint space and so how advanced the arthritis is in your knee. It is normal to have arthritis in your knee as you get older. It is the same as developing wrinkles on your face! The arthritis in your knee does not specifically give you pain. You do not need an X-ray to confirm this diagnosis.

Steroid Injection

If your knees are often swollen or the pain is worsening then you can have a steroid injection into your knee. This will help to reduce the pain to a degree and settle some of the inflammation in your knee. This in turn often helps your mobility and function. There is a risk associated with this but this will be discussed if you decide to go ahead with an injection. However, an injection cannot reverse the arthritis already in your knee but can reduce the symptoms.

Surgery

Knee replacement surgery in most cases should be considered if all other options have been tried and not successful. You will be referred through a pathway to see a surgeon. They will ask you to have had a course of physiotherapy, an X-ray and sometimes a joint injection. If you can manage your pain using tablets and your knee is stable then you do not want to go onto a knee operation. Washouts are no longer a recognised treatment for an arthritis knee and will often irritate the knee.

Alternative treatment

Often treatments like acupuncture, sports massage and exercise classes such as pilates, yoga, Zumba and dancing can help your function and pain.