

## **Partial Lateral Menisectomy (Expectations)**

### **Aim**

The lateral meniscus is the rubbery shock absorber on the outside of the knee that helps to spread the load between the thigh (Femur) and shin (Tibia) bones. Tears cause pain due to the torn flap irritating the lining of the joint. They can also cause the knee to stick (Lock) due to catching between the bones. Removing the torn part of the cartilage prevents these and stops the torn flap of cartilage damaging the knee and causing arthritis.

### **Physiotherapy**

**Before surgery** it is important to help with strength and range of movement. You will also learn the exercises you will do after the surgery.

**After surgery** it is vital to:

- Reduce pain and swelling
- Restore full range of movement
- Restore normal muscle tone and strength
- Progress to a return to normal daily activities (often takes 12 - 16 weeks)

### **Crutches**

These are not normally required. Exceptional cases require them for a few days.

### **Wounds**

The large dressing should be removed after 24 hours and replaced with small sticky dressings. The stitches will be removed at 7 days. You will see Mr Lavender in clinic after 2 weeks.

### **Painkillers**

Painkillers are put into your knee at the time of surgery and last 6 – 8 hours. Begin taking other painkillers as soon as the sensation starts to return to your knee. Continue for a few days before you should be able to gradually stop them.

### **Driving**

Is allowed after 24 hours providing you can do an emergency stop.

### **Work**

Rest for 1 to 2 weeks is advisable.

### **Kneeling**

Can be done when you feel able

### **Flying**

Should not be done for 6 weeks due to the risk of blood clots in your legs.

### **Sport**

Impact sports are best avoided for at least 12 weeks.