

## Knee arthroplasty in patients suffering from rheumatoid arthritis

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Rheumatoid Arthritis (RA) varies from mild disease to severe joint destructive variation that progresses rapidly, eventually leading to unremitting pain and joint deformity. Knee Arthroplasty has proven to be the most successful intervention that reduces knee pain and improves physical function in RA patients. RA patients are often younger (by approximately 10 or more years) than osteoarthritis (OA) patients at the time of TKA.

We typically operate 1200-1800 cases a year out of which about 150 cases are of RA. we have taken a follow up of 100 cases of RA for the study with no exclusions. All these patients were local residents and easy to follow up. The patients belonged to age group ranging from 34 yrs to 60 yrs.

Out of total 100 RA knees in 58 patients operated with knee arthroplasty, 42 were bilateral while 16 were unilateral cases. Of these 40% cases (22) were wheel chair bound while one patient was quadruped for last 08 years. Patients suffering from RA had either fixed valgus or varus deformities in single or both legs, which were corrected after knee arthroplasty. The female to male ratio was to the shocker as F : M = 9 : 1.

Contrary to other studies, we operate all RA patients with cruciate retaining (CR) knee arthroplasty with good to excellent results in terms of good range of movements in almost all cases done with 2 years follow up. Due to poor bone quality in patients with RA, almost all knees were operated with cemented knee arthroplasty. Although RA patients usually have a greater risk of poor wound healing and late infections, there we have no reported case of any infection.

Results were good to excellent in all knees in terms of pain relief, range of motion, and knee stability with reported good relief in other joint pain after knee arthroplasty. Compromised result in form of inferior functional outcome was found in one of the cases due to polyarticular involvement having bilateral ankle stiffness.

All cases of RA treated with knee arthroplasty were referred for rheumatologist treatment with strict instructions of no prescription of immuno-suppressants for 6 weeks following post-operation.

Knee arthroplasty has been recognized as one of the most successful surgical interventions for reducing pain and enhancing physical function in RA patients. Despite the complexities often encountered in RA patients, a well-timed, well executed knee arthroplasty has been proven to improve overall function and quality of life of patients with disabling RA of the knee.

### Biography

Dr. K. C. Mehta is the Chief Knee Surgeon & Director of Chandra Knee Clinic and Director (Knee Programme) Apollo Hospitals International, Ahmedabad, India as well as Clinical leader for Knee programme of Apollo Group worldwide (Apollo Group is the 2nd largest private health provider in the world outside USA). He is also the Director, Krishna Heart Institute, Ghuma, Ahmedabad. He is the founder Chairman of The Chandra Knee Foundation Ahmedabad, India. The foundation organizes International knee meet every year for aspiring young & senior knee surgeons across the globe. Dr. Mehta is the Co-designer of the lateral uni-compartmental concavo-convex knee replacement with Mr. Angus Strover. He has worked as a Knee Surgeon at London Knee Clinic, Central London. He had an opportunity to work at various centres of excellence for knee surgery across U.K. such as Droitwich Knee Clinic, Royal Chester Hospital & Queen's Hospital, London & many more. Dr. Mehta has full registration with General Medical Council, UK and Gujarat Medical Council and additional registration with Medical Council of India. He has various other professional life memberships to Medical Defence Union (UK), AO Alumni Association (Swiss), World Orthopaedic Concern, Indian Medical Association, Indian Orthopaedic Association, Indian Arthroscopy Society, Bombay Orthopaedic Society, British Association of Knee Surgeons, etc. Dr. Mehta has been invited to attend & participate in various National & International conferences, symposiums, workshops & seminars worldwide. Recently he has been invited as a faculty to deliver guest lecture at the Cadaveric Navigation Knee Replacement Course at Vienna, Austria in July 2005; Asia Pacific Arthroplasty Society (APAS) Meet at Beijing, China in June 2010; ASEAN Meet 2011 at Taiwan in Oct. 2011. He has been a guest faculty in different knee meets at Shanghai, Hanoi, Singapore, USA, etc. and has been invited as Speaker at Asia Pacific Arthroplasty Society, APAS 2011 at Beijing, China in December 2011; Vietnam Orthopaedic Association & VIET DUC University Hospital, Vietnam in October 2010; Asia Pacific Arthroplasty Society, APAS 2010 at New Delhi in September 2010. Freshly Dr. K. C. Mehta was invited as a Speaker in ASEAN Meet Conference held at Indonesia in January 2012 to speak on his new modified least invasive surgical technique developed by him. He has operated more than 3000 cases to date. He is the only Speaker from India who has been invited in the founding meet of ICJR (SEA) to be held in Sept. 2012. He has been also been invited as a guest Speaker at Nagpur in Sept. 2012 to address the Central India Arthroplasty Meet. One of the cases operated by Dr. Mehta has been selected as one of the top ten miracles of the medical sciences for the year 2010 by the Divya Bhaskar Group. Dr. K. C. Mehta's new technique has changed the approach in the direction of knee replacement surgery with smaller incision, reduction in operative time, shorter hospital stay & faster recovery to work.

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