

Surgical procedure

Revision Total Knee Replacement

IMPORTANT INFORMATION

This surgical fact sheet is for general information about this procedure only. It is not intended to be used as medical advice or to replace advice that your relevant healthcare professional would give you. If you have a particular medical problem, please consult a healthcare professional. If your injury or illness is critical or life threatening, call triple zero (000). To speak to a registered nurse, call healthdirect on 1800 022 222.

Notes and questions to bring to your doctor

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

For more help with what to ask your doctor, visit healthdirect.gov.au/question-builder

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This document will give you information about a revision total knee replacement. If you have any questions, you should ask your GP or other relevant health professional.

What is a revision total knee replacement?

A revision total knee replacement is an operation to take out your old knee replacement and put in a new one (see figure 1).

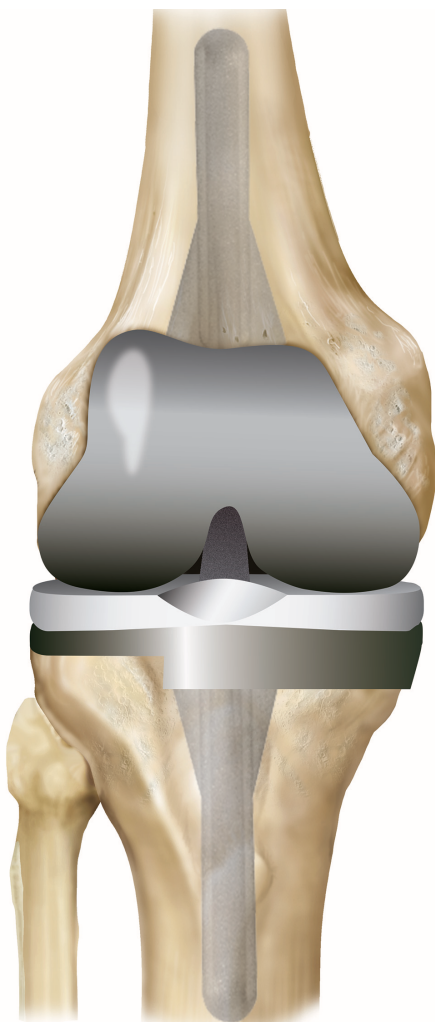


Figure 1

A revision total knee replacement

A knee replacement can fail for the following reasons.

- Wearing out of the artificial joint.
- Infection in your knee replacement.
- Dislocation.
- Fracture around your knee replacement.

What are the benefits of surgery?

You should be able to walk better and do more of your normal activities.

Are there any alternatives to surgery?

Surgery is the only treatment for a knee replacement that is failing.

If your knee replacement keeps coming out of joint, you can wear a brace.

If you have an infection, you can sometimes prevent your knee replacement from failing by taking antibiotics.

If you have a fracture, you can sometimes have an operation to fix the fracture, without changing your knee replacement.

What does the operation involve?

Various anaesthetic techniques are possible.

Your surgeon will make a cut on the front of your knee. They will remove your knee replacement and any cement.

Your surgeon will put in a new knee replacement.

This is fixed into the bone using acrylic cement.

The type of surgery you need can be more complicated if you have an infection, or the bone is thin or broken.

What complications can happen?

1 General complications

- Pain
- Bleeding
- Unsightly scarring
- Difficulty passing urine
- Infection of the surgical site (wound)
- Blood clots
- Chest infection
- Heart attack
- Stroke

2 Specific complications

- Split in the bone
- Damage to ligaments or tendons
- Damage to nerves
- Damage to blood vessels
- Infection in your knee
- Loosening
- Dislocation
- Continued discomfort
- Severe pain, stiffness and loss of use of your knee

How soon will I recover?

You should be able to go home after 4 to 7 days. You will need to use crutches or walking sticks for a few weeks.

Regular exercise should help you to return to normal activities as soon as possible. Before you start exercising, ask the healthcare team or your GP for advice.

A revision total knee replacement can fail with time.

Summary

If your original knee replacement fails, you can usually have another operation to do your knee replacement again. If this revision operation is successful, you should be able to continue many of your normal activities.

Acknowledgements

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