



Anna Nelsen, DPT uses a physio ball to demonstrate a movement, “bridges,” an overall strengthening exercise for the hips, with Carlos Baloco, NCH Outpatient Rehabilitation technician.

Pre or Postoperative Joint Replacement Therapy Programs: a Physical Therapist's Perspective

Since life expectancies have increased and folks enjoy a more active lifestyle with outdoor activities and sports, it is inevitable that knee and hip joint replacement surgeries have increased.

Most often affecting elderly patients, the causes are usually due to cartilage deterioration from end-stage arthritis or from previous injury to the ligaments surrounding the joint, according to NCH Outpatient Physical Therapist Anna Nelsen, DPT.

NCH joint replacement patients benefit from a comprehensive treatment plan from presurgery to postoperative therapeutic care.

After the initial physician exam, patients are expected to attend the two-hour preoperative patient education program for total joint replacement that discusses surgery preparation through post-surgery.

Presurgery physical therapy is for the assessment and treatment of the patient. Plan of care and follow-up with the physician determines whether or not surgery will occur. In addition, this presurgical therapy allows a patient to understand which exercises are important, become acclimated to the therapeutic environment, and helps set expectations postoperatively. A rapport of trust is established between patient and therapist.

The therapist gains awareness of the patient's particular needs, and thus is able to address the patient's rehabilitation more quickly.

After receiving a referral from your physician for physical therapy, the therapist conducts a comprehensive evaluation and develops an indi-

COMMITTING TO PRE AND POST JOINT REPLACEMENT THERAPY

- Communicate with your therapist at each visit
- Engage in your home exercise program
- Be patient with the healing process
- Contact your physician if you have any concerns

vidualized treatment plan.

“If a patient's muscles are not strong prior

to joint replacement surgery, they are less likely to be strong after the surgery. While muscle is typically not cut during surgery, the muscles are moved around in order to allow the surgeon access to the joint,” explained Nelsen. “I tell my patients that it will feel like someone has been kicking them in the knee for three hours due to the surgeon pulling the muscles apart manually. So the stronger the muscles are before surgery, the better they will be afterward.”

A physical therapy plan is customized to individual needs. Goals can include strengthening the affected joint muscles and increasing range of motion to optimize functional goals. Therapists also give postsurgery instructions such as the need to begin moving the knee as soon as possible.

Nelsen advised that rest, ice, compression and elevation (RICE) are essential, along with gentle, active movement, with the goal of regaining range of motion in the first few weeks after surgery.

“We also use stimulation devices that send mild electrical impulses to manage pain when indicated,” added Nelsen.

“Each patient is unique, and the healing process is different for each. I tell them not to compare themselves to the experiences of others and to keep committed to their pre and postoperative programs.”

For more information or to register for the pre-operative surgery course, call Ann Kiersted at (239) 624-3917 between 7 a.m.-3:30 p.m. For information about NCH Outpatient Rehabilitation Services at Greentree Center, call (239) 596-0834 or visit www.nchmd.org/rehab.