

*Inspired  
by  
You*

# Total knee replacement

Information for patients



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## INTRODUCTION

A total knee replacement is an operation (also known as surgery) to replace a knee joint damaged by arthritis.

This booklet has been prepared by Orthopaedic staff at St Vincent's Hospital to give you and your family information about your operation.

## WHAT IS A KNEE REPLACEMENT?

The knee is the joint formed between the femur (thigh bone) and the tibia (lower leg bone). The patella (knee cap) which is in front of the knee forms a second joint with the femur.

Cartilage covers the bone surfaces in the joint and acts as a shock absorber, providing smooth gliding of the joint surfaces.

Arthritis causes wearing away of the cartilage, exposing underlying bone. This causes pain, stiffness, deformity of the knee and associated pain.

When this happens, a joint replacement is required to replace the damaged joint surfaces. All or part of the joint may be replaced. The surgeon removes the worn pieces of bone and replaces them with a metal knee.

## CLINIC

Before your surgery you will be assessed by the Orthopaedic team in the pre-admission clinic.

The aims of this clinic are to:

- identify any medical conditions you may have
- plan for a streamlined recovery after your operation.

This process will include a variety of tests and a review of your medical history. Please allow 4 hours for this appointment.

Physiotherapists and occupational therapists will review your current function and give you information about your admission to hospital.

Please ask any questions you may have.

## HOW LONG WILL I STAY IN HOSPITAL?

You will be in hospital for 3 or 4 days, but this can vary.

Make sure that you tell family and friends that you may need extra help after you leave hospital.

## WHAT DO I NEED TO BRING TO HOSPITAL?

- Comfortable clothes such as a tracksuit or exercise clothes
- Comfortable rubber-soled enclosed shoes or slippers (slip-on shoes or slippers with no back are not acceptable)
- Toiletries
- Sleepwear
- Elbow crutches (if you already have a pair)

*Do I need to bring my medications with me?*

- ✗ **Do not** bring any pain medications with you to hospital.
- ✓ **Do** bring any other medications that you are taking.

## PREPARING FOR SURGERY

### *Smoking*

Smoking makes it harder for wounds to heal and can cause chest infections after surgery.

We strongly recommend that you stop smoking or at least reduce how many cigarettes you smoke. You should do this 3 months before your operation.

### *Weight management*

If you are overweight, moderate weight loss is a good way to reduce knee pain. Aim for a gradual weight loss of 500 grams or 1 kilogram each week.

Being underweight is also a risk to your health. Being underweight may lead to nutrient deficiencies that affect your bone health, immune system, energy levels, and sense of wellbeing.

### *Staying well hydrated*

Make sure you drink enough fluids, like water. It can help with skin elasticity and healing.

### *Good nutrition*

Your body needs to be well nourished with healthy food. Nutrients from food will help give you the strength, energy, and ability to heal.

People who are well nourished are less likely to get infections, and more likely to heal faster.

There are many nutrients from food that are important before, during, and after surgery.

**Protein** is needed to:

- maintain and build your strength before surgery
- help you heal after surgery.

Some protein should be included at every meal. High protein foods may also contain other nutrients, such as zinc and iron, which help wounds heal. These foods include: lean beef, pork, fish, poultry, eggs, milk and dairy products, soy milk, beans, nuts, and tofu.

**Vitamin C** has many benefits:

- helps wounds to heal
- supports the immune system
- helps our bodies absorb iron.

Food sources include citrus fruits, berries, tomato, and capsicum.

### *Diabetic patients*

High blood sugar levels can:

- make wounds slow to heal
- increase the risk of wound infection.

Aim for blood sugar levels below 10mmol/L.

### *Exercise*

Exercise can reduce pain and improve function in people waiting for surgery.

Exercise is also an excellent way to lose weight, improve muscle tone and general wellbeing.

Research has shown that people who exercise regularly have improved wound healing.

### *Alcohol*

Reducing how much alcohol you drink will improve your chances of a better recovery after your surgery.

## PREPARING YOUR HOME

When you are discharged you will be walking with elbow crutches, so there are some household tasks you won't be able to do for a few weeks.

It's a good idea to prepare your home before you are admitted to hospital for your surgery.

### Home set-up

- **Clutter:** It is important to remove any clutter in your home. This will help reduce the risk of falling or tripping over.
- **Flooring:** Pick up any loose rugs, mats or cables.
- **Carrying:** You will be walking with elbow crutches so you will not be able to carry items in your hands. Where possible, put things in places that are easy to reach.

- **Cleaning:** Avoid heavy cleaning and household tasks while you are recovering. If you can, do these tasks before your surgery or ask family or friends for help.

- **Laundry:** You will not be able to carry a washing basket when you are first discharged home. You may need to ask for help from family or friends to do your laundry.

Do heavy laundry tasks like sheets and towels before your operation. Use a clothes horse instead of a washing line to avoid reaching.

### Seating

Ensure you have suitable chairs and seats at home, in both the lounge and dining areas. Seats should be:

- approximately knee height
- have arm rests, to help you stand up and sit down in the chair.

### Showering/Dressing

Make sure your toiletries and towels are within reach.

Make sure you can reach your underwear and clothes without having to bend too far.

Make sure you have slip-resistant mats inside and outside your shower or bath.

We will give you a special body wash to use at home. Chlorhexidine wash is a high powered anti-microbial soap that helps to clean your skin before and after surgery. Please use this:

- instead of soap
- every time you have a shower
- for the first week after you leave hospital.

### Meals/Food/Shopping

Buy or cook meals that can be stored in the freezer and reheated easily. This will reduce preparation and cleaning time.

Ensure staple foods are well stocked. For the first few weeks after your surgery you will need help from your family or friends with grocery shopping. If this is not possible, please research phone or online ordering of groceries.

## DAY OF SURGERY

You will be admitted to hospital on the day of your surgery. You will go to the Day Procedures Centre, which is on the first floor of the main hospital (Building A, the Inpatient Services Building).

Make sure you only take the medications the doctor has told you to take on the morning of your surgery.

When you arrive, you will be assessed by the pain management team and the unit doctor. During your stay you will be cared for by many medical, nursing, and allied health staff.

## AFTER SURGERY

After you have surgery the hard work begins. A knee replacement can be painful but the long term results outweigh the short term pain.

Getting you moving and walking helps you recover and get the most from your knee replacement. You will be up and moving (we call this 'ambulating') as soon as possible. This usually happens the day after your surgery and continues until you are moving well enough to go home.

## GOING HOME

You will be reviewed by medical staff to make sure that you are well enough to be discharged. The team will ensure that you are independent and safe to go home. Discharge time is 10am.

You will be sent home with pain medicine (analgesia). Before you go home, the pharmacist will explain how to take this medicine.

Nurses will visit you at home after you are discharged. We will give you a dressing pack to give the nurse so they can change your wound dressing.

You will also receive chlorhexidine wash to use in the shower for the first week after you leave hospital.

The physiotherapist will give you a list of exercises to do at home.

## CARING FOR YOURSELF AT HOME

By the time you leave hospital you will be able to do most tasks at home. However, it is a good idea to have the support of family or friends if you can. Let them know that you may need some extra help.

### *Driving*

You **must not** drive for 6 weeks after your operation.

### *Swelling*

It is normal to have swelling after your operation but it is important to minimise it. If your knee swells, you can use ice on the area. You can help reduce swelling by keeping your leg elevated for some of the time when you are lying down or sitting.

It is normal for the knee to swell after you exercise. After you have finished exercising, lay down with your leg elevated for 30 minutes.

## *Pain*

After your operation you can expect some degree of pain. This pain should reduce over the next 6 weeks.

## *Wound care*

It is important that you look at your wound dressing every day to see if there are any signs of infection, such as

- moderate amounts of ooze
- redness extending out of the dressing
- an offensive smell.

If you are worried about any of these things, please talk to the nurse who visits you at home or contact the Orthopaedic team on 9231 4702 or 9231 4703. Please do not start taking antibiotics unless your GP has spoken to the Orthopaedic team at St Vincent's first.

You should seek medical advice **immediately** if you have:

- a significant increase in pain or swelling
- increased shortness of breath
- a red, inflamed or oozing wound
- ongoing fevers higher than 38 degrees.

## *Compression socks*

We recommend that you wear compression socks for 6 weeks after your operation. This will help reduce the risk of developing a blood clot.

## *Walking and exercise*

You should start a walking program after your discharge home. Start with a short walk and increase the distance every day. We expect that you will need to use two crutches for up to 6 weeks after your operation

- your community physiotherapist will give you more advice about this.

Continue your home exercise program as prescribed by the physiotherapist.

