

Arthroplasty in modern times: An orthopedic surgeon's new challenges

Nithin Sunku

Orthopedics has advanced leaps and bounds in field of arthroplasty. Now more and more joint replacements are being performed on day to day basis. Apart from knee, hip and shoulder other joints which are finding place in replacements are ankle, elbow and interphalangeal joints.

Total knee arthroplasty (TKA) is frequently done and is one of the successful treatments for end stage arthritis. Lots of options and different implants are available, but do surgeons really influence or change the clinical practice management?

The development of new device for replacement of joints requires time and investment. Material properties will influence device design and there will definitely determine their functional score. Other than design a few variables also influence the outcome.

One study recently showed that the TKA survival in patients younger than 55-year-old was comparable to that in older active patients, without increased complications or revisions at a minimum follow-up of 10 years. The results of this study showed that primary hybrid TKA can provide successful pain relief, function and quality of life in younger patients with osteoarthritis [1].

Despite obvious technical differences and highest levels of evidence including Cochrane reviews, we surgeons are the ones to choose from these options based on our philosophy and cannot comment using for or against specific methods using hard criteria. We face a certain status— when even Cochrane evidence leads to Philosophy [2].

So lots of factors influence the replacement surgeries. These need to be kept in mind before we go in for surgery.

Keywords: Arthroplasty, Hip, Knee, Replacement of joints, Shoulder

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