

Information for Patients

Surgery to washout and remove debris to relieve knee pain (a knee arthroscopy) is a procedure that should only be carried out when specific criteria are met. This is because the medical evidence tells us that the intervention can sometimes do more harm than good and there are alternative treatments which are usually far more effective. However, a knee arthroscopy can be considered if you have arthritis in your knee, or other specific symptoms such as locking of the knee. It can also be carried out if doctors need to assess your suitability for other procedures.

About the condition

Osteoarthritis is a common condition affecting nearly 9 million people in the UK. It initially affects the smooth cartilage lining of the joint and makes movement more difficult, leading to pain and stiffness. Once the cartilage lining starts to roughen and thin out, the tendons and ligaments have to work harder. This can cause swelling and the formation of bony spurs, called osteophytes. Severe loss of cartilage can lead to bone rubbing on bone, altering the shape of the joint and forcing the bones out of their normal position.

It's important you and the doctor or the specialist clinician treating you make a shared decision about what's best for you if your knee pain is becoming a problem. When deciding what's best you should both consider the benefits, the risks, the alternatives and what will happen if you do nothing.

What are the **BENEFITS** of the intervention?

Arthroscopy for osteoarthritis in the knee will only benefit you if there is a history of specific symptoms such as the knee locking.

What are the **RISKS** of the intervention?

The risks of arthroscopy include infection, bleeding and pain as well the risks of the anaesthetic for the procedure. There is also an increased risk of blood clots in the leg following the procedure.

What are the **ALTERNATIVES**?

There are a number of alternatives that can improve symptoms and function. These include, exercise, physiotherapy, losing weight and sometimes steroid injections. Carefully managed pain relief for relatively short periods can also be prescribed.

What if you do **NOTHING**?

Doing nothing is not likely to be harmful. Arthritis can be painful and affect your mobility. The less invasive options should always be considered first with knee replacement surgery only being considered as a last resort when other treatment options have been shown not to work.

You can find out more about the [NHS Evidence Based Interventions](#) programme online.