

Lower cuff pressure reduces wound complications in TKA

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Lower tourniquet cuff pressure, achieved using a limb-occlusion pressure method, is associated with reduced postoperative wound complications after total knee arthroplasty, according to research published in the Dec. 19 issue of *The Journal of Bone & Joint Surgery*.

(HealthDay)—Lower tourniquet cuff pressure, achieved using a limb-occlusion pressure method, is associated with reduced postoperative wound complications after total knee arthroplasty, according to research published in the Dec. 19 issue of *The Journal of Bone & Joint Surgery*.

To examine whether limb-[occlusion](#) pressure reduces tourniquet cuff pressure used during total [knee arthroplasty](#), Charlotta Olivecrona, R.N., of the Karolinska Institute in Stockholm, and colleagues conducted a randomized, controlled study involving 164 [patients](#) who underwent total knee arthroplasty. Participants were randomized to the routine method, whereby tourniquet cuff pressure was based on systolic blood pressure and a margin decided by the surgeon, or limb-occlusion pressure

(intervention).

The researchers found that, compared with the control group, in the intervention group the tourniquet cuff pressure was significantly lower. While no between-group difference was observed with regard to postoperative pain or complications, 40 of 47 patients with [wound complications](#) at discharge and 14 of 16 at the two-month follow-up had a cuff pressure above 225 mm Hg.

"The generally lower tourniquet cuff pressure in the limb-occlusion pressure group did not decrease the postoperative pain or other outcomes in our patients," the authors write. "However, patients who had undergone total knee arthroplasty in a bloodless field with a cuff pressure of ≤ 225 mm Hg had a lower rate of wound complications such as delayed healing and infections."

More information: [Abstract](#)
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