Arthroscopic surgery for arthritis does not impact incidence of total knee arthroplasty, study finds

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The addition of arthroscopic surgery to nonoperative management of
knee arthritis does not delay or hasten total knee arthroplasty (TKA) during 10 years of follow-up, according to a study published online April 18 in *JAMA Network Open*.

Trevor B. Birmingham, Ph.D., from University of Western Ontario in London, Canada, and colleagues compared the long-term incidence of TKA in patients with osteoarthritis (OA) of the knee randomly assigned to nonoperative management with or without additional arthroscopic surgery. The analysis included 178 adults diagnosed with OA of the knee referred for potential arthroscopic surgery.

The researchers found that during a median follow-up of 13.8 years, 33.7% of patients in the arthroscopic surgery group (resection or debridement of degenerative tears of the menisci, fragments of articular cartilage, or chondral flaps and osteophytes that prevented full extension) versus 41.9% in the nonoperative management group underwent TKA (adjusted hazard ratio [HR], 0.85; 95% confidence interval [CI], 0.52 to 1.40). When accounting for crossovers to arthroscopic surgery during follow-up (15.1%), results were similar (HR, 0.88; 95% CI, 0.53 to 1.44).

Within five years, the cumulative incidence of TKA was 10.2% in the arthroscopic surgery group versus 9.3% in the nonoperative management group (time-stratified for zero to five years: HR, 1.06; 95% CI, 0.41 to 2.75). Within 10 years, the cumulative incidence was 23.3 and 21.4%, respectively (time-stratified for five to 10 years: HR, 1.06; 95% CI, 0.45 to 2.51).

"Approximately 80% of patients did not undergo TKA within 10 years of nonoperative management with or without additional knee arthroscopic surgery," the authors write.

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