



Knee Osteotomy

Osteotomy literally means "cutting of the bone." In a knee osteotomy, the tibia (shinbone) or femur (thighbone) is cut and reshaped to help relieve pressure on the knee joint.

This procedure is used with patients who have early-stage osteoarthritis that has damaged only one side of the knee joint. Knee osteotomy is most commonly performed on people who may be considered too young for a total knee replacement, as total knee replacements wear out much more quickly in people younger than 55.

Many people who undergo knee osteotomy will eventually need a total knee replacement — typically about 10 to 15 years after the knee osteotomy.

Knee osteotomy has three goals:

- To transfer weight off the arthritic part of the knee
- To correct poor knee alignment
- To prolong the life span of the knee joint and prolong the patient's need for a knee replacement surgery

Procedure:

A knee osteotomy operation typically lasts between 1 and 2 hours.

Wedge Osteotomy: Your surgeon will make an incision at the front of your knee, starting below your kneecap to remove a wedge of bone. He or she will "close" or bring together the bones in order to fill the space created by removing the wedge. A plate and screws will be inserted to hold the bones in place until the osteotomy heals.

This is the most commonly used osteotomy procedure.

Opening Wedge Osteotomy: In some cases, rather than "closing" the bones, the wedge of bone is "opened" and a bone graft is added to fill the space and help with healing.

After the procedure:

An advantage to osteotomy is that there are no restrictions on physical activities after the surgery - you will be able to comfortably participate in activity, even high impact exercise.

Because you cannot put your weight on your leg after osteotomy, it takes longer to recover from an osteotomy procedure than a partial knee replacement.

Because results from knee replacement surgeries have been so successful, knee osteotomy has become less common.