Should I Consider Joint Surgery?

Before considering surgery, there are a number of other treatment options available for osteoarthritis (OA), including physiotherapy, exercise and weight management, as well as medication. However, if you’ve exhausted other options and are still seeking relief, you may be wondering if surgery is right for you. This resource will help you talk to your doctor about when surgery might be appropriate as well as the risks and benefits involved.

1. Am I ready for joint surgery?
If significant OA is present, choosing to have surgery is likely to depend on your level of pain and how restricted you are in your daily activities. Ask yourself:

- Do you need help to complete daily tasks because of your osteoarthritis?
- Does your pain keep you up at night despite using medication or other sleep aids?
- Has your pain gotten worse lately?
- Have you exhausted all other non-surgical treatment options?
- Is it too difficult to get up from a chair or climb stairs?
- Does your doctor say other treatment options won’t be effective?
- Do you find it difficult to deal with the side effects of your medication?
- Are you committed to the required pre- and post-surgical therapies?

If you answered “Yes” to all of the above questions, it might be time to talk to your doctor about surgery. If you answered “No” to any of the questions, surgery might still be an option, but there are other factors to consider.

2. When is surgery not appropriate?
If your pain isn’t limiting your normal activities, if you can get relief from medications or therapy, or if you can still do things like walking and shopping, surgery may not be necessary. Surgery is also not appropriate for patients who want to return to high-impact sports such as running.

On the other hand, waiting until you’ve already lost a lot of your strength, flexibility, and ability to perform daily tasks can make it more difficult to return to your normal activities after surgery. “Surgery is best done when your pain is limiting, but not disabling and when your function is limited, but you are still capable of improvement” (“When is hip surgery necessary?” Sunnybrook Hospital, 2018).

Doctors may not recommend surgery for people who have:

- Poor general health
- Active infection or are at high risk of developing an infection (e.g. patients who are smokers, have uncontrolled diabetes, are immunocompromised, or who are very obese and have not attempted weight-loss)
- Severe muscle weakness that would make it difficult for muscles to support the new joint
3. Benefits and risks of surgery

Benefits can include:

- Reduced pain
- Improved ability to stand, walk and/or move
- Increased ability to do daily activities
- Return to low-impact recreational activities (e.g. swimming, cycling, golf)
- Lifetime use of new joint with proper weight management, joint protection and regular exercise/activity

Risks can include:

- Ongoing pain in the affected joint
- Premature wearing of the new joint and the need for a revision
- Post surgical complications including blood clots, infection, fracture, bleeding, nerve injury, limp, joint stiffness, wound healing problems
- Loosening of the implant that makes revision surgery necessary

4. What’s next?

Surgery isn’t for everyone – it’s always up to what you decide in discussion with your doctor. Consider everything surgery will involve, including preparation and rehabilitation. You need to be an active participant in your recovery and have patience in the process. You can also consider getting a second opinion before making the decision.

If you think you’re ready for surgery, make an action plan with your physician. Discuss which implants to use, the surgery process, the risks to be aware of and your plan for recovery and rehabilitation. Planning in advance will make for a smoother recovery and likely a better outcome.

Sources

Very Well Health, 2019
https://www.verywellhealth.com/are-you-ready-for-hip-replacement-surgery-2548624

University of Washington

Sunnybrook Hospital, 2018

Harvard Medical School
https://www.health.harvard.edu/pain/6-signs-that-it-may-be-time-to-have-a-joint-replaced

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