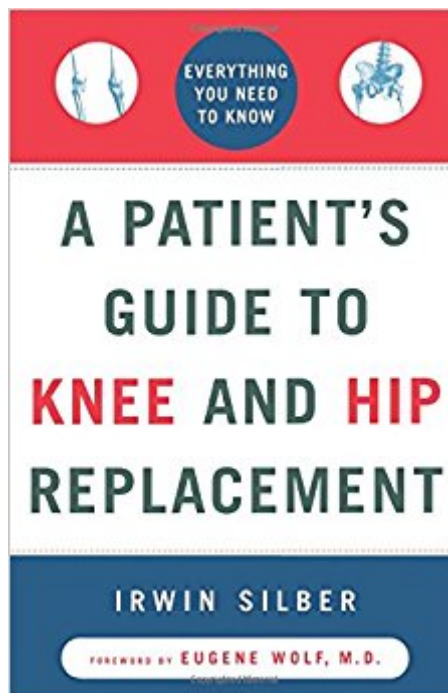




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# A Patient's Guide To Knee And Hip Replacement: Everything You Need To Know



## Synopsis

Written by a patient for other patients and in consultation with an Orthopedic Surgeon and a Physical Therapist, *A Patient's Guide to Knee and Hip Replacement* takes readers through the complete joint-replacement process, from the decision whether to have Surgery and the Preop Preparations, through the operation itself, the hospital stay, and the recovery period. Irwin Silber has had both knees and one hip replaced. Like hundreds of thousands of other joint-replacement patients, Silber is now physically active and free from pain as a result of today's highly effective medical technology. His chronicle of his own experiences, supplemented by interviews with many others who have had joints replaced, describes the whole procedure from a patient's perspective, including:

- \* How to determine whether it's time for a joint replacement, and why doctors are sometimes hesitant to perform surgery; possible consequences of delaying surgery
- \* A full description of the actual surgery, including the risks involved
- \* Information about postoperative physical therapy, including tips on how to prepare your home for the recovery process

Clearly written and profusely illustrated, *A Patient's Guide to Knee and Hip Replacement* is an informative and helpful book for anyone contemplating or already undergoing joint replacement.

## Book Information

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## Customer Reviews

Irwin Silber is the former editor of the magazine *Sing Out!* and has written numerous books on folk and popular music. He has also written on political and cultural matters for *The Guardian*, *Crossroads*, and *Frontline*. He lives in Oakland, California.

Introduction In 1997 orthopedic surgeons in the United States performed almost 400,000 total knee and hip replacements. That number is growing each year. As a result of this relatively new medical technology, many people who thought they were fated to spend the rest of their days in a wheelchair or walking in pain -- and even then only with the help of a cane or a walker -- have resumed normal lives. I am one of those people. You might even say that, statistically speaking, I'm three of them, since during one twelve-month period, from March 1993 to March 1994, I had three total joint replacements -- both knees and my left hip. Today I walk without a cane, ride a bike, play tennis and, in general, lead a normal life. How did that happen and what was the experience like? That's what this book is about. This book is not about arthritis, although arthritis is the principal cause of the pain and disability that lead many people to consider joint replacement. Nor is this a book that will tell you how to adjust your life to the crippling effects of arthritis. There are many other books that do that. Rather, this is a book about the most revolutionary new development for the treatment of the consequences of the most severe cases of arthritis in the past hundred years: the replacement of crippled and diseased joints -- most particularly hips and knees -- with artificial prostheses. This procedure has already enabled hundreds of thousands of people to regain a quality of life they thought had been lost forever. As the title says, this is a patient's guide to knee and hip replacements. It is written not from a doctor's perspective but a patient's, by someone who has gone through the experience not once but three times. The idea for writing this book first came to me when I was told that I needed what turned out to be a series of joint replacements. But when I asked my orthopedic surgeon to suggest a book on the subject that I could read, he told me that aside from technical books written for the medical community, there weren't any. It wasn't until much later -- after I had my new joints -- that I realized just how helpful such a book would have been for me. And so, in this book, I have tried to reproduce as much of my experience as I thought would be relevant for others facing the prospect of joint-replacement surgery: what I went through when my arthritis first became symptomatic; the buying-time measures various doctors recommended; why joint replacements were finally recommended; how I found an orthopedic surgeon in whom I felt confident; the factors that went into my decision; the scores of questions I had going in, only some of which were answered in my preop discussions with my surgeon; my anxieties about the surgery; the operation itself; and, not least, the rehabilitation process. Although I am not a doctor, many of the medical aspects of joint replacements are also discussed. That information is based on a series of lengthy interviews with my orthopedic surgeon, Dr. Eugene Wolf, the most active orthopedic surgeon at the California-Pacific Medical Center in San Francisco. I have digested this information into what I hope readers will find is readily accessible language. Dr. Wolf has also reviewed the final

manuscript to make sure that my interpretation of medical language is substantively accurate. In 1989, after experiencing increasing pain in my right knee, I was diagnosed as having extensive arthritis in both my knees and my hips. Various treatments -- special exercises, physical therapy, cortisone shots, other painkillers, and arthroscopic surgery -- provided temporary relief. But after a while, they were no longer effective. The pain returned even more strongly than before. When it did, it became more difficult for me to pursue normal activities. Meanwhile, I had become totally dependent on nonsteroidal anti-inflammatory drugs (NSAIDs) just to get by each day. I was sixty-three years old at the time and had worked all my life as a journalist. In my later years, especially, my work often brought me to parts of the world where the facilities posed real challenges to anyone with a handicap. (I had been to Vietnam, Cambodia, China, Cuba, the USSR, and many other places where hotel accommodations and means of transportation were often an adventure in themselves.) When I wasn't working, I played tennis four or five times a week. (People who know about such things rated me a "High B.") I went bike riding, swam, hiked, and walked extensively. I also did much of the cooking and shopping at home. But as my condition worsened, my activity was severely curtailed. More and more my work was at my desk. My last trip abroad was to the (former) Soviet Union in 1989. (With my leg elevated on a pillow, I watched the fall of the Berlin Wall on Soviet television from my hotel room in Moscow.) Over the next few years I worked on a book that explored the historical and theoretical sources of the Soviet collapse. But as the book neared completion, even sitting at my computer was getting uncomfortable. The last few months before I finished it in the fall of 1993 became a race against time. (The book, *Socialism: What Went Wrong?* was published a year later.) Tennis, of course, was out of the question. Any weight-bearing activity, including walking, was extremely painful. Driving was getting more and more difficult. My contributions to my family's daily living needs became memories. Increasingly, I found myself sitting in my recliner, avoiding the moment of ambulation. (The inanity of most television programming turned out to be my friend. Without it I might be sitting in that chair still.) Nature's calls were a constant source of trepidation until a friend suggested I get a raised toilet seat. But although that somewhat solved the physical problem, it was an ongoing reminder that I faced a future laced with increasing indignities. The pain even went to bed with me at night. By then my life had begun to revolve around my arthritis. I was living on powerful antipain drugs -- not just NSAIDs but even more powerful painkillers such as Vicodin. And the prospect facing me was that my condition would only get worse. I had dismal visions of myself housebound, if not wheelchair-bound, for the rest of my life. Years later I was in touch -- via the Internet -- with a fellow sufferer who captured my feelings perfectly. "I hate the thought," he wrote, "that the disease defines who I am." Eventually, the time I

had bought with three rounds of arthroscopic surgery on my knees ran out, and I became convinced that my only alternative was total joint replacement. So during one twelve-month period starting in March 1993 I had both knees and my left hip replaced. The surgery was performed by Dr. Eugene Wolf at the California-Pacific Medical Center in San Francisco. That stretch was one of the most difficult I've ever been through. I felt as though my life had become one long surgery. While recovering from one operation I was preparing for the next. I couldn't tell where the pain from the surgery left off and the pain from the next area of distress began. A month before the last of my joint replacements (my hip, in March 1994), the pain had become so unbearable that I was counting the days and then the hours until I would once again be lying on the operating table waiting to hear the anesthesiologist say those increasingly familiar words: "Sweet dreams!" Nevertheless, it was also a period of great optimism. Starting the day after my first knee replacement, I felt that I was on the road to reclaiming the rest of my life. Physical therapy was not only a means of regaining the use of my joints, it was a way of taking control of my rehabilitation. Two months after the last operation, I was able to do a daily one-mile walk by myself. Four months later, carried away by my progress, I ventured out to the wall adjacent to my favorite tennis court to see what I could do. Actually, not much. It would be another six months before I'd try again. But in October 1994, when my book came out, just seven months after my hip was replaced, I went on a one-month speaking tour across the country promoting my book and telling audiences what I thought had gone wrong with the Soviet attempt to construct a socialist system. (If you're interested in my opinions on that subject, you'll have to read the book.) Now I'm in my mid-seventies and I lead a relatively normal life. I do not use a cane or a walker. I drive, can walk several miles at a stretch, and, much to my family's relief -- at least that's what they say -- I am back to cooking. I am also taking out the garbage, changing lightbulbs, cleaning out the cats' litter box, and undertaking similarly challenging chores with equanimity. And, much to everyone's surprise, including my own, I am playing tennis again -- mostly doubles but even an occasional set of singles. I am also riding my bike and navigating stairs and even (not unduly steep) hills. My wife can take extended trips without fear of leaving me alone. (And the raised toilet seat is on a shelf in my closet.) No, I can't do everything. Certain activities, like gardening, that require constant stooping and bending are too uncomfortable. I don't carry anything weighing more than twenty pounds. I shouldn't go up a ladder or sit down on the floor -- getting down from the former and up from the latter are difficult -- but I've done both in an emergency. I avoid low chairs and couches, and I feel a lot more secure if there's a banister when I go up and down stairs. Although I live with the likelihood that sooner or later my other hip will probably also have to be replaced, my doctor and my physical therapist consider me a "success story." (Since I

can cover almost as much court as many others in my ever-skeptical geriatric tennis crowd, they are not convinced that I actually have had three joints replaced.) In fact, my wife and I are so optimistic that we sold our single-level, elevator-accessible condominium and bought a split-level house. Now hardly a week passes without my getting a call from a prospective knee- or hip-replacement candidate who wants to talk to someone who has been there and done that. And that's why I've written this book. Obviously, no book can answer specific medical questions about your condition and whether or not you are a likely candidate for a joint replacement. Only your doctor can do that. Nor should my experience be taken as an exact model for anyone else's treatment. Although there are no known "cures" for arthritis, there are various treatments for it, depending on its stage of development. In fact, a joint replacement is usually the last resort, used only when the disease is so far advanced that the alternatives no longer help. There are also many variations in joint-replacement surgery depending on the source of the patient's ailment, his or her physical condition and age, new developments in the field, and the orthopedic surgeon's particular methodology. (Keep in mind, too, that since this book is based principally on my own experience, its focus is on knee and hip replacements. Not coincidentally, these are the most common joint replacements.) On the other hand, my experience is far from unique. That became clear after interviews with my orthopedic surgeon and my physical therapists and by talking (directly and on the Internet) to scores of people who have had knee and/or hip replacements. Most have been successful. A few have not. And although no two patients (or surgeons, for that matter) are exactly alike, the basic elements of the procedure are pretty much the same. This book is designed to do two things: 1. Enable the reader to get a vivid idea of what's involved in a joint replacement from a patient's point of view by seeing and feeling it through my experience. 2. Help the reader more fully understand the key elements in this experience, including the various options available at each stage of the process; alternatives to joint-replacement surgery; what to expect in the preop period; what the surgeon actually does in the operating room; the recovery process; managing with your new knee or hip; the role and different stages of physical therapy; the risks involved in this type of surgery; and what the patient can reasonably expect in the long term. I hope that by enabling you to share an experience you might currently be contemplating, this book will help demystify the entire process and not only help you get through your surgery -- if that's the course you opt for -- but also help you get the best possible results from it. Good luck! Copyright &copy; 1999 by Irwin Silber

I purchased this book and two others when I found I needed Knee Replacement Surgery. The information I found in these three books was very helpful, along with 3 doctors opinions in selection

of my surgeon and the type of replacement surgery to have. I have now had successful Partial Medial (Oxford) surgery on both my knees. My recovery was fast and I am without pain. I can routinely walk several miles comfortably and have recently (when my riding mower failed) cut my 1 1/2 acre yard with a front wheeled drive self propelled walk behind lawn mower, two weekends in a row. I now have my riding mower repaired, so will go back to cutting most of the yard with it, but will continue to use the walk behind mower as it provides good exercise and is better at cutting close to building and plants.

Informative. Easy to read.

After reading this book, and attending a Joint Replacement Class that my HMO requires prior to surgery, I learned that much of the material is outdated. I belatedly checked the publication date, which is 1999. Now I know to check that first, before buying. For many subjects, there may not be significant changes, but in the sciences, technology, engineering and medicine, there's a huge gap between past and present. The illustrated exercises in the book seem valuable, so I've been dabbling in those, but post-surgery, I'll stick to what my physical therapist advises.

I am 43 and am having a hip replacement next week. After reading this book, I still have questions. I would have liked to see more about what takes place during a hip operation, as I have found better descriptions on the web than in this book. I would have liked more info on anesthesia choices. Also, I found myself having to sift through information on the knee (which I cared nothing about) to get to the information on the hip, often treated as an afterthought and dismissed with words like "the hip replacement follows the same general pattern as a knee replacement." I would have also liked some comments about cemented hips versus uncemented (he does talk about the knee) and the new ceramic hip, and in general, more specific information about the hip throughout the book. This book might have worked better if it had two sections, one for the hip and one for the knee. That would reduce the frustration of having to read through pages of knee information before finding out if the author thinks it is applicable to hips also (and mentally trying to separate the info). To sum up, I guess the book is worth it, but it is not everything you need to know.

Several benefits from reading: (1) You are not alone. (2) Figure out questions to ask your doc. (3) Face the giant. (4) Understand the process. Therefore worth the price.

I had a total knee replacement 10 weeks ago. This book helped (even in the medical profession one doesn't have all the insight from a patient's view) a lot and I'm handing it to my Mom who had a hip replacement 12 weeks ago.

Most of the information in this book - we had already heard - but there were a few gems along the way.

The book had little information on hip replacement, particularly little about post operative concerns. There was more relevant information on the internet and from hospital brochures.

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