

# THE OVER-40 KNEE: A USER'S GUIDE

## 1 Features & Functions

Knees are the biggest, most-complicated joints in the body. And, like other complex mechanisms, they're prone to breakdowns. These amazing assemblages of bones, cartilage, muscles, ligaments and tendons bear our weight and function as hinges for all our leg movements. Malfunctions can mean temporary inconvenience—or chronic, crippling disabilities.

## 2 Maintenance

To forestall or minimize problems, take proper care of your knees.

### **Don't Overload Them**

If you are overweight, slim down. Every pound you lose reduces the pressure on your knees by four pounds, according to a study at Wake Forest University



in Winston-Salem, NC. Eat right for bone health; make sure you're getting ample doses of calcium and vitamins C and D.

### **Don't Overstress Them**

If years of high-impact exercise—jogging, aerobic dance, downhill skiing—have taken a toll, lighten up. Play doubles tennis instead of singles, walk instead of run and use the elliptical machine at the gym rather than the stair climber. Or, try something new: swim, cycle or practice yoga. “Mitigate



the pounding,” advises physical therapist James Dunleavy, director of rehabilitation services at Trinitas Regional Medical Center in Elizabeth, NJ.

### **Strengthen and Stretch**

Strengthen the muscles that support your knees. That includes the quadriceps at the front of the thigh, and the gluteus maximus and hamstrings in back. Try leg lifts, hamstring curls, wall squats and similar exercises. Your doctor may prescribe physical therapy, and the therapist will tailor a routine to your needs.

Always warm up for five minutes or so before you start your workout, and stretch afterward.

### **Use the Right Stuff**

Wear well-fitting sneakers with arch supports. And trade them in



for new ones at least every 500 miles or after one year of use—whichever comes first.

If your knees hurt when you exercise, talk to your doctor about minimizing the pain with braces, wraps and over-the-counter analgesics.

But don't stop moving or your muscles might atrophy. That could leave you at risk for more problems in the future.

## 3 Troubleshooting

If your knees routinely ache, swell and buckle, you may be suffering from one of the following conditions:

**Osteoarthritis (OA).** Sometimes called degenerative arthritis, the condition is caused by the erosion of the cartilage that cushions your bones. An estimated 10 million American adults suffer from OA in their knees, making it the prime source of trouble. Often worst when you stand or walk, OA inflicts varying degrees of pain and stiffness.

**Rheumatoid Arthritis (RA).** This is an autoimmune disease that can cripple the joints. RA can strike anyone at any age, but occurs most often in women aged 25-55.

**Injuries.** (Note: These may flare up years after a fall, stumble or other trauma.)

**Torn cartilage**, especially of the *meniscus*, which acts sort of like a shock absorber and is located at each side of the kneecap; can occur suddenly or gradually

**Tendon injuries**, ranging from sudden ruptures to inflammation from overuse (*tendonitis*); may worsen when climbing stairs

**Torn ligaments**, signaled by sudden sharp pain and a popping sensation; most frequent in young athletes, but can afflict active seniors



- **Compress** with elastic bandages

- **Elevate** your knee

Take over-the-counter pain medication, such as acetaminophen; use nonsteroidal anti-inflammatory drugs (NSAIDs), like aspirin and ibuprofen

If you consult your doctor, she or he may send you for x-rays and other tests, and prescribe physical therapy, painkillers, and other medications or treatments. These could include:

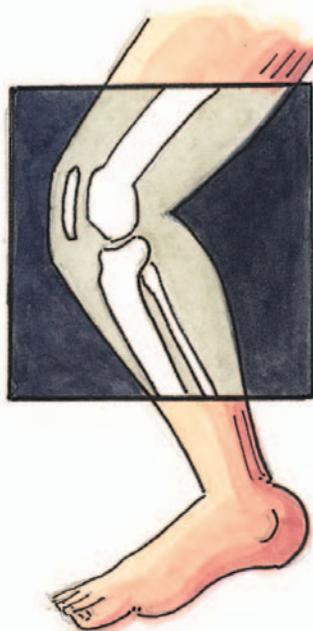
- Taping and/or bracing the affected knee
- Injections of anti-inflammatory corticosteroids or lubricating hyaluronic acid, a sticky, slippery substance that lubricates the joints
- Alternative treatments, including acupuncture, gluco-

samine supplements and orthotic shoe inserts

- You may also be referred to a rheumatologist, who specializes in nonsurgical treatments for arthritis. Another specialist you might see is an orthopedic surgeon, who, despite the name, does both surgical and nonsurgical treatments for joint pain.

### **Surgical options**

**Arthroscopy**, in which a miniature camera is inserted through a small incision in your knee. The camera can detect internal problems, such as loose cartilage, and fix them when possible.



**Cartilage transplants**, using your own lab-grown cartilage or cartilage from a donor

### **Tendon and ligament repair**

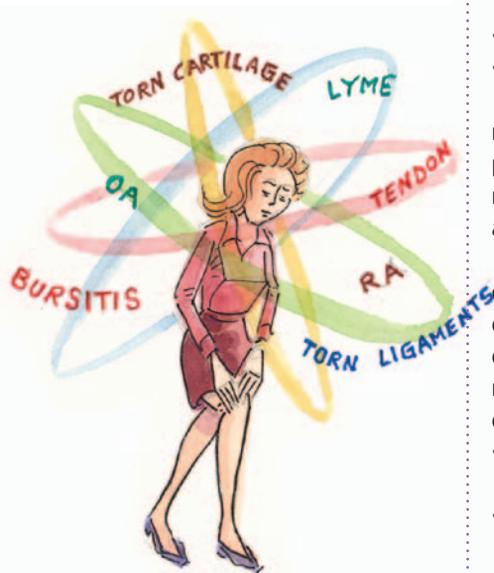
### **Partial- or full-knee replacements**

Recovery time will depend on the extent of the surgery, along with how well you follow the suggested regimen of care and exercise.

Your new knees, like the old ones, will need your help to keep them in working order.

Long may they run! 

—Lynn Langway



**Bursitis**. Inflammation of the *bursa*, the small sacs of fluid that surround the knee joint; often caused by repetitive motion

**Diseases and infections**. Lyme disease, lupus, gout and other disorders can cause knee pain.

## 4 Treatment

If your pain is sharp, prolonged or severe, see a medical professional as soon as possible. If pain is minor, try these time-tested home remedies for a day or two.

### **RICE**

- **Rest** from your knee-busting activity
- **Ice** down the injury with an ice pack for 20 minutes at a time

