



## CLINICALLY RELEVANT QUESTIONS

Hip and Knee Replacements continue to be two of the most effective operations in the whole field of surgery and are being done in ever increasing numbers, particularly as our population ages. It is commonly the case that osteoarthritis affects both knees or hips in an individual, but usually there is a difference in the time of onset and severity meaning operations are done one at a time, often years apart. However, sometimes the disease is equally severe bilaterally prompting patients to ask the clinically relevant question:



### Can I have both of my joints done at once?

The answer is certainly "yes" it is possible, but unusual, and the risks and benefits have to be carefully weighed.

Studies have shown for bilateral procedures, an increased risk of venous thromboembolic events (VTE), cardiac complications and overall mortality<sup>1 2 3</sup>. These risks appear to be doubled with bilateral operations, although with proper pre-operative assessment and modern techniques and medications, these risks are very low, so even twice the risk remains a small number. A longer anaesthetic is also required. However, there is no increase in infections or rate of revisions.



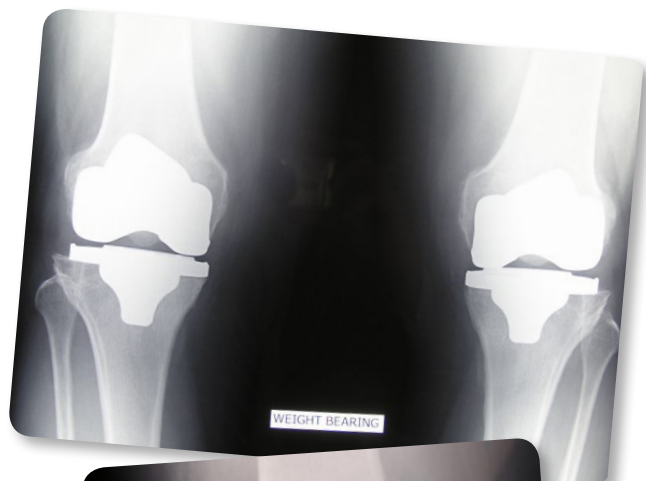
On the other hand, if both joints are equally diseased (and will definitely need replacing), doing two procedures separated by months greatly prolongs the period of recovery and requires two hospital admissions and two periods of physiotherapy. There is also the risk of two anaesthetics and all these



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things significantly increase the economic burden. There is a small group of patients so severely affected, that recovery from a single sided operation may be compromised by the remaining diseased side, making bilateral procedures highly recommended. The potential for a quicker recovery of mobility and relief of pain as well as lower costs may have compelling advantages to some patients, particularly those still in the workforce.<sup>4</sup>

***In my own practice, a small number of bilateral procedures are done each year, as long as the relevant risks and benefits have been carefully explained. If the patient is young enough, in good general health and is able to withstand the effort of the early days of rehabilitation, simultaneous bilateral hip or knee replacements can be done safely, speeding their recovery and return to normal life.***



### PROS

- Less recovery time
- One hospital stay
- One anaesthetic
- Less cost

### CONS

- Higher risk of VTE
- Higher risk heart problems
- Longer single anaesthetic
- Prolonged disability

1. Yeager AM, et al, Are Bilateral Total Joint Arthroplasty Patients at a Higher Risk of Developing Pulmonary Embolism Following Total Hip and Knee Sur..., J Arthroplasty (2013), <http://dx.doi.org/10.1016/j.arth.2013.11.001>
2. Rasouli, MR, et al., Perioperative Morbidity and Mortality following Blateral Total Hip Arthroplasty, J. Arthroplasty (2014) 29, 142-148
3. Bolognesi, MP, et al, Simultaneous vs Staged Bilateral Total Knee Replacements..., J. Arthroplasty (2013) 28 Suppl.1, 87-91
4. Niki, Yasuo, et al, Comparison of postoperative Morbidity between Simultaneous Bilateral and Staged Bilateral Total Knee Arthroplasties..., J Arthroplasty (2014) 29, 504-509