



Fitter Better Sooner

Endorsed by:



Royal College
of Surgeons
of England

Preparing for a knee replacement operation

What is a knee replacement?

A knee replacement is an operation in which your knee joint is replaced with an artificial joint.

What type of anaesthetic will I have?

There are two main types of anaesthetic given for this surgery:

- **spinal anaesthetic** – the lower half of your body is numbed by an injection in your lower back. This can be given on its own, with sedation (medicine to relax you) or together with a general anaesthetic to help with pain relief after the operation
- **general anaesthetic** – anaesthetic drugs which make you unconscious, so that you will feel nothing throughout your operation.

A nerve block (an injection of local anaesthetic around the nerves that go to your legs) might also be used to reduce pain after surgery.

Your anaesthetist will talk with you about the ways in which you can have your anaesthetic – based on your health, age and other medical conditions. Together you can choose the best method for you.

How long will I stay in hospital for?

Most people stay in hospital for one or two days after knee replacement surgery, although it can sometimes be longer. A few hospitals have started offering this procedure as a day case.

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Before the operation

- Think about what you can do to improve your health before the operation. Stopping smoking, reducing how much alcohol you drink, eating more healthily and keeping active all help you recover more quickly after surgery. Ask your GP practice about lifestyle support available to you. You can also find useful advice at [nhs.uk/better-health](https://www.nhs.uk/better-health).
- Even though exercise might be difficult for you, increasing activity and strengthening the muscles around your knee will help your recovery. Swimming, walking and cycling (stationary bikes can be good) can safely allow you to improve both your fitness and muscle strength. Listen to your body and stop if it's too much. There are some knee exercise videos at: bit.ly/3QC5EXz. General exercises to improve fitness for operations can be found at: bit.ly/3NaPqSf.
- If you have other medical conditions (eg diabetes, high blood pressure, chest or heart disease) check with your GP surgery, well ahead of your operation, that your medication is up to date and as effective as it can be. This can help prevent delays to your surgery and give you the best chance of your operation and recovery going well.
- It's also important to have good dental hygiene and for your teeth and gums to be in good condition before the surgery, as this will reduce the risk of infection.
- Think about how you will manage at home after the operation. It will be difficult for you to climb stairs afterwards and you will require crutches or a frame to walk for a time. It may be useful to rearrange your furniture and think about where you're going to sleep. Many everyday activities (dressing, washing, putting on shoes or slippers, getting on and off the toilet) will be more difficult and will take longer until you are mobile. You may be able to arrange to borrow mobility aids from the hospital. Some charities, such as the British Red Cross, offer a hire service for mobility and toilet aids (bit.ly/3QHbVBu).
- It might help to plan some easy-to-prepare meals or frozen meals for when you come home after your operation. Think about including plenty of vitamin-rich fruit and vegetables in your diet to help your recovery. You can find information on healthy eating here: bit.ly/3tRScoE.
- Remember to wear any hearing aids and take some spare batteries.
- You should take your normal medication to the hospital with you, in their original packaging. The staff will advise you on how to take it on the day of the operation. Check you have enough medication to last you for a few weeks when you return home.
- It is normal to feel anxious about an operation. To help you relax before and after your surgery, think about bringing some headphones and music with you, or something to read or do. Think about learning some breathing exercises or relaxation techniques.



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- On the morning of surgery (or the evening before), you should have a bath or shower. You may be given an antiseptic to wash with to help reduce the risk of infection.
- Do not shave your leg; the surgeons will do this for you if necessary.
- Your stomach needs to be empty during surgery. The hospital will advise you in advance on when to stop drinking and eating on the day of the operation. It's important to drink plenty of water until you are told to stop to help you feel better after surgery and reduce complications.
- Make sure you have some painkillers, such as paracetamol, available at home. The hospital will talk with you about how best to take these with the other medication they will give you. Ice packs are also helpful to reduce swelling and discomfort after the operation.
- When you return home it is helpful if family or friends can stay with you to start with or call round regularly. Discuss with them any help you might need after the operation.
- You won't be able to drive for at least six to eight weeks after the operation, so you may need family or friends to help with your shopping or to order food online.



After the operation

- You will have a fairly long scar over the front of your knee. You'll have a large dressing around your knee to protect the wound for several days.
- At the end of the operation, your surgeon may place a drain (a thin plastic tube connected to a container) in your knee to collect fluid or blood from the joint. This will be removed on the ward after one or two days when it is no longer needed.
- You will have regular painkillers to take by mouth and some stronger pain relief will be available if you need it. You may also be given medicine to stop you from feeling sick after surgery. Stronger pain killers can cause constipation and you may be given medication to help with this.
- To help prevent blood clots in your legs, a small machine may gently squeeze your legs until you can move about and can wear compression stockings. You will usually be given drugs to thin your blood whilst you are in hospital and later at home.
- A physiotherapist will give you regular exercises to do to help you regain movement. They will help you get up and out of bed, usually on the day after your operation.
- It is normal to have swelling in your knee and the lower half of your leg for some days afterwards. This will gradually reduce as you start moving around again.

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Recovering at home

- Once you are home, it is important to regularly do the exercises that the physiotherapist will give you before leaving the hospital.
- The hospital will usually give you stockings and medication to prevent blood clots after surgery. Please follow the instructions closely. Regular leg exercises will help reduce your risk of blood clots as you recover.
- The swelling in your knee may take several months to disappear completely. To help reduce the swelling, it is important to keep your leg up when resting and sitting down during the day. Most people are able to walk without crutches or a frame after about six weeks.
- Your nurse will give you instructions about when to arrange with your GP practice for any stitches or clips on your wound to be taken out.
- Take painkillers as instructed by the hospital and use ice packs regularly. If you have diabetes, you may have less feeling in your legs, so please ask for advice about using ice packs directly on the skin as these can cause damage.
- Some stronger painkillers can cause constipation. It is important to eat fruit and vegetables and drink plenty of fluids (six to eight glasses per day) to keep your bowels moving normally. To start with you may not feel like full meals. Do try and keep up your calorie intake in the days after surgery to give your body the energy it needs to heal.
- Once you go home, it is best to stick to your normal routine as much as possible. Try to get up and get dressed every morning. You will feel tired and will need to rest at times during the day. This is perfectly normal after an operation.
- As well as practical help, family and friends can offer you company. They can also help motivate you to do the exercises and walking, especially if you are finding things difficult. Your physiotherapist or occupational therapist will assess you whilst you are in hospital to see whether there is additional help they can give you at home.
- Discuss with your physiotherapist or surgeon when you might be able to drive again. You will need to be able to bend your knee enough to get in and out of the car, control the car safely without pain, and do an emergency stop.
- Depending on your job, you may be able to return to work six to twelve weeks after your operation. The hospital will give you a fit (sick) note to cover you for this period – check you have this before you leave hospital. Speak with your employer or their occupational health team about any adjustments needed to prevent you standing for too long at work. You shouldn't kneel on your knee until your surgeon advises it is safe to do so.

Things to look out for at home

You should contact your GP or the hospital where you had your surgery if:

- you have severe pain or your pain increases
- your wound becomes red or your knee feels hot to the touch
- you develop pain and swelling in your lower leg or chest pain and breathing difficulty
- you notice fluid or a discharge around your wound
- you feel unwell or develop a fever above 38°C or vomiting.

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These symptoms may occur if you have developed an infection and may need further treatment, usually with antibiotics.

If you feel very unwell you should go to your nearest emergency department as soon as possible.

Additional resources available online

Royal College of Anaesthetists

- Preparing for surgery: Fitter Better Sooner toolkit and animation (rcoa.ac.uk/fitterbettersooner).
- Anaesthesia explained (rcoa.ac.uk/documents/anaesthesia-explained).
- Anaesthetic choices for hip or knee replacement (rcoa.ac.uk/patientinfo/leaflets-video-resources).
- Common events and risks in anaesthesia (rcoa.ac.uk/patientinfo/risks).
- Patient information series (rcoa.ac.uk/patientinfo/leaflets-video-resources).

Centre for Perioperative Care

- Information for patients (cpoc.org.uk/patients).

Versus Arthritis

- Knee replacement (bit.ly/3QCLGvY).

NHS

- Knee replacement (nhs.uk/conditions/knee-replacement).



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If you have any general comments, please email them to: patientinformation@rcoa.ac.uk.

Your feedback helps us understand who is using our information, how useful it is and how our resources have helped you. Thank you.



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This leaflet will be reviewed within three years of the date of publication.

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