

# MENISCAL (CARTILAGE) TEAR

## What is a meniscal (cartilage) tear?

The meniscus is a piece of cartilage in the middle of your knee. Cartilage is tough, smooth, rubbery tissue that lines and cushions the surface of the joints. You have a meniscus on the inner side of your knee (the medial meniscus) and a meniscus on the outer side of the knee (the lateral meniscus). Each meniscus attaches to the top of the shinbone (tibia), makes contact with the thighbone (femur), and acts as a shock absorber during weight-bearing activities. If a meniscus tears, it can cause knee pain and can limit motion.

## How does it occur?

A meniscal tear can occur when the knee is forcefully twisted or sometimes with minimal or no trauma, such as when you are squatting.

## What are the symptoms?

Symptoms may include the following:

- You have pain in your knee joint.
- You have immediate swelling with fluid in the joint, called an effusion.
- You can't fully bend or straighten your leg.
- Your knee locks or gets stuck in one place.
- You hear a snap or pop at the time of the injury.

A chronic (old) meniscal tear may give you pain on and off during activities, with or without swelling. Your knee may sometimes lock, and you may have stiffness in the knee.

## How is it diagnosed?

Your healthcare provider will review your symptoms and how the injury occurred. He or she will ask about your medical history and examine your knee. Your provider will move your knee in several ways that may cause pain along the injured meniscal surface. You may have X-rays to see if the bones in your knee are injured, but a meniscal tear will not show on an X-ray. An MRI scan (magnetic resonance imaging) can help diagnose a meniscal tear.

## How is it treated?

Treatment may include:

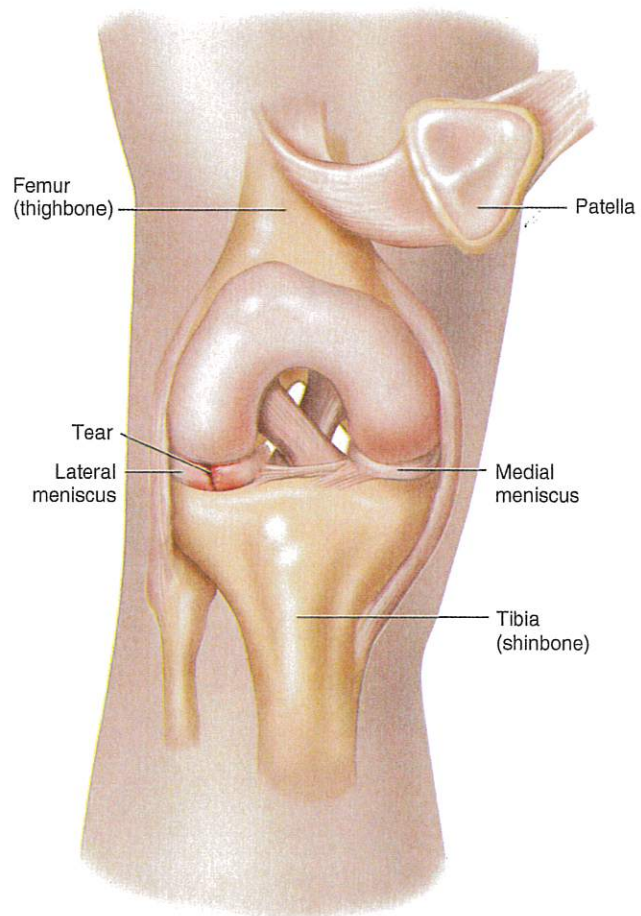
- applying ice to your knee for 20 to 30 minutes every 3 to 4 hours for 2 or 3 days or until the pain and swelling are gone
- elevating your knee by placing a pillow underneath your leg (to help reduce swelling)

- wrapping an elastic bandage around your knee to keep the swelling from getting worse
- wearing a knee immobilizer or other brace to prevent further injury
- using crutches
- taking anti-inflammatory or pain medicine prescribed by your healthcare provider (adults aged 65 years and older should not take non-steroidal anti-inflammatory medicine for more than 7 days without their healthcare provider's approval)

While you are recovering from your injury, you will need to change your sport or activity to one that does not make your condition worse. For example, you may need to swim instead of run.

Arthroscopic surgery is needed to repair or remove large torn pieces of cartilage. The surgery usually takes about an hour. An arthroscope is a tube

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Front View of Knee

with a light on the end that projects an image of the inside of your knee onto a TV screen. By putting tools through the end of the arthroscope, the doctor can usually repair or remove the damaged meniscus. Because the meniscus is a valuable shock absorber, the doctor will leave as much of the healthy portion of the meniscus as possible during surgery.

You will go home the day of the surgery. You should keep your leg elevated. Take it easy for at least the next 2 to 3 days.

Do not take part in strenuous activities until your healthcare provider feels you are ready.

### How long will the effects last?

If you have a small tear that has not been repaired or removed, you may still be able to function well and be active. However, your knee may sometimes swell, lock, be stiff, or hurt during activities.

If you have surgery, you will need to spend time rehabilitating your knee. Everyone recovers at a different rate, depending on the severity of the injury and their general health. Many people return to their previous level of activity within a month or so after surgery.

### When can I return to my sport or activity?

The goal of rehabilitation is to return you to your sport or activity as soon as is safely possible. If you return too soon you may worsen your injury, which could lead to permanent damage. Everyone recovers from injury at a different rate. Return to your sport or activity will be determined by how soon your knee recovers, not by how many days or weeks it has been since your injury occurred. In general, the longer you have symptoms before you start treatment, the longer it will take to get better.

You may safely return to your sport or activity when, starting from the top of the list and progressing to the end, each of the following is true:

- Your injured knee can be fully straightened and bent without pain.
- Your knee and leg have regained normal strength compared to the uninjured knee and leg.
- Your knee is not swollen.
- You are able to jog straight ahead without limping.
- You are able to sprint straight ahead without limping.
- You are able to do 45-degree cuts.
- You are able to do 90-degree cuts.
- You are able to do 20-yard figure-of-eight runs.
- You are able to do 10-yard figure-of-eight runs.
- You are able to jump on both legs without pain and jump on the injured leg without pain.

If you feel that your knee is giving way or if you develop pain or have swelling in your knee, you should see your provider.

### How can a meniscal tear be prevented?

Unfortunately, most injuries to knee cartilage occur during accidents that are not preventable. However, you may be able to avoid these injuries by:

- having strong thigh and hamstring muscles
- gently stretching your legs before and after exercise
- wearing shoes that fit properly when you exercise and that are right for the activity you're doing

When skiing, be sure that your ski bindings are set correctly by a trained professional so that your skis will release when you fall.