PAIN MANAGEMENT FOLLOWING TOTAL KNEE ARTHROPLASTY
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Discussing realistic postoperative outcome expectations forms an important part of preoperative patient education. Meticulous patient selection, nutrition optimization, surgical planning, perioperative anesthetic support, postoperative recovery and rehabilitation, as well as the application of multidisciplinary pathways are some of the key factors in achieving consistent patient outcomes in total knee arthroplasty.

The concept of pre-emptive and multimodal anesthesia has grown in popularity over the years. The management of pain starts preoperatively with options of pre-emptive analgesia. Regional anesthesia has potential in providing better postoperative pain relief with reduced side effects due to opioid administration. Current literature suggests this technique may also provide the added advantage of reducing hospital length of stay and improving rehabilitation progress.

Both femoral block and local infiltration of analgesia are good options in managing post-total knee arthroplasty pain, subject to availability and hospital resources. Each individual patient has to be assessed for the suitability of various analgesia options.

The use of adjuncts, including cryotherapy, can potentially decrease the total amount of analgesics required by the patient during postoperative recovery.