

Healthcheck

Issue 9 • Media Bulletin

Everything you need to know about knee injuries

From being too adventurous on the ski-slopes to attempting a sliding tackle in the Sunday league, injuries to the knee are common and very often sports-related. The most common injuries are:

Sprain – where one or more of the ligaments is overstretched through twisting or pulling resulting in either a tear or a rupture

Strain – where a tendon or muscle is overstretched

Cartilage damage – cartilage acts rather like a ‘shock absorber’ in the knee and once damaged it can leave the area highly vulnerable

Overuse – extremely common among runners and those who regularly participate in high-impact cardiovascular sports

Mr Alister Hart, Consultant Orthopaedic Surgeon at The London Clinic comments:

“Often with knee injuries, the patient’s description of the injury alone can play a large part in the diagnosis. If someone has violently twisted their knee it may increase the chance of an ACL or peripheral meniscal tear (a tear on the outer aspect of the cartilage). Feeling the knee suddenly ‘give way’ may suggest a meniscal injury.

A ‘crack’ or ‘pop’ is characteristic of an ACL injury. The inability to weight bear, walk, ski, or continue to play sport are all signs that a significant injury has taken place.

However, the most important symptom to look out for with any knee injury is swelling, especially within the first six hours of an injury.”

The treatment required for knee injuries is dependent on the type of injury and the damage caused, and can vary from simply taking painkillers to requiring a course of physiotherapy and, in more extreme cases, surgery.

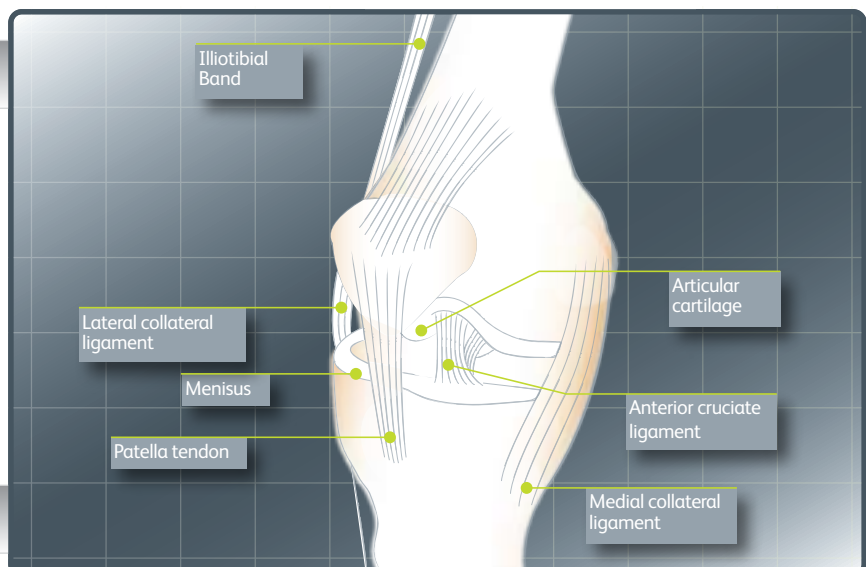


Image of the Acrobot Navigator™

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Structures within the knee which are most often damaged :

- meniscus
- anterior cruciate ligament (ACL)
- intra-articular cartilage / bone fracture
- medial collateral ligament (MCL)
- lateral collateral ligament (LCL)
- illiotibial (IT) band
- patella tendon



Knee injuries continued...

The surgical treatment of knee injuries using GPS technology has developed considerably in recent years, with outstanding benefits for both patient and surgeon. These unique procedures can be performed at The London Clinic using either the Acrobot Navigator™ or BrainLAB VectorVision® platform.

Mr Dinesh Nathwani, Consultant Orthopaedic Surgeon at The London Clinic explains:

“Computer assisted knee surgery has significantly improved the level of accuracy with which orthopaedic surgeons can execute surgical procedures. Using the same Global Positioning System (GPS) technology which is used to map out road routes, wireless trackers and cameras produce an interactive model of the knee joint on a computer. This provides the guidance for surgeons to perform procedures that are accurate to within a fraction of a degree as a result of the system’s ability to pinpoint the alignment of the knee, rather than relying on educated guesswork. This is a major breakthrough for knee surgery, repairing knees to almost perfection.”

Dos and don'ts for knee injuries:

- Do rest the injury for two-three days before slowly reintroducing movement so as not to lose muscle strength
- Avoid taking a hot bath in the first three days following an injury
- Do not massage the affected area as this can increase bruising and swelling
- Support your injury with bandaging, which will also help decrease the swelling
- Place ice or a bag of frozen peas wrapped in a towel on the injury to help reduce swelling and bruising
- Avoid alcohol as this can increase swelling and bleeding

The London Clinic’s orthopaedic department is equipped to deal with a wide range of conditions, including treatment for patients needing acute management and surgery. It offers advanced facilities such as thermostatically controlled and electronically adjustable baths with hoists and ‘roll-in’ showers – highly important for those patients who may experience mobility difficulties following surgery.

Dispelling the ‘detox myth’



Eat five a day



Balanced diet



Keep hydrated



Reduce alcohol intake



Get active



Enough sleep

In recent years, more and more people feel compelled to start the year abstaining from anything considered ‘bad’ for them, otherwise known as the ‘detox’. Unrealistic New Year’s resolutions, from cutting out all alcohol and fatty foods, to following a rigorous daily gym workout, are usually dropped by the second week of January. Scott Marsden, Senior Dietician at The London Clinic, wants to dispel the ‘detox myth’ once and for all, and explain why it is not the answer to weight maintenance and long-term health.

Scott Marsden comments: “There are an increasing number of products on the market with detox claims, however these are often meaningless and not supported by any real clinical or scientific evidence. People need to be warned that, at worst, some detox diets could have harmful affects and, at best, they are a waste of money. Anyone worried about the after-effects of Christmas overindulgence would benefit more from making small lifestyle changes that can be sustained throughout the year.

“The liver is a detoxifying organ, so as long as you maintain a healthy liver, it will naturally remove toxins from the body. Therefore a detox is not necessary – a healthy lifestyle is the answer.”

Scott provides his top tips for a healthy lifestyle this January. These tips will also help you to maintain a healthier weight and liver:

1. **Five A Day** - Get your five portions of fresh fruit and vegetables each day. Think ‘rainbow effect’ to ensure that you are getting enough

antioxidants by eating a wide range of different coloured fruits and vegetables

2. **Balanced Diet** – Include foods such as oily fish (two-three portions a week), lean proteins, nuts, seeds, pulses and low fat dairy. Your main meals should include a healthy balance of fat, carbohydrates and protein, plus fruit and vegetables

3. **Keep hydrated** – Make sure you drink between 1.5 – 2 litres of water every day. This will help to flush out any toxins from your body

4. **Alcohol** – Alcohol can not only make you pile on the pounds, but it can also have a detrimental effect on your liver. When the liver breaks down alcohol, it stores the energy as fat in your liver. There should be little or no fat in a healthy liver. Too much of this fat can build up if you drink more than the liver can cope with, and can increase the risk of developing fatty liver disease. Try and stick to the recommended alcohol guidelines and have two ‘booze-free’ days every week, to give your liver a break

5. **Get Active** – Try keeping to 30 minutes of moderate exercise, five times a week. Simple things like taking the stairs rather than the lift or going for a short walk at lunch time can make a big difference

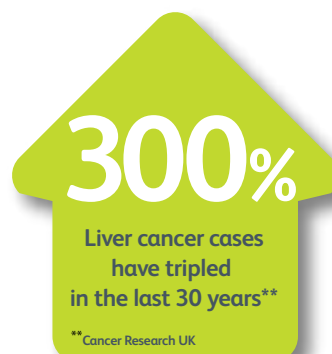
6. **Sleep** – Getting enough sleep is vital, as sleep deprivation has been found to increase the risk of obesity, depression and stress. Everyone needs different amounts of sleep but a good guide is to aim for six – eight hours a night.

The dietetic service at **The London Clinic** is available to all inpatients and those outpatients who are referred by their GP.

Scott Marsden, Senior Dietician provides patients with an initial assessment and will then develop a personalised nutritional care plan for the patient. This plan may include nutritional counselling and suggestions for dietary improvements.

Binge drinking – the real cost

Alcohol consumption in Britain increases by 40% in the month of December¹ – more than any other country in the world – with some of us drinking the recommended weekly amount of units in just one night. But what damage are we doing to our body, especially when we drink vast quantities of alcohol in such a short period of time, otherwise known as binge drinking?



While drinking alcohol comes with recommended guidelines, the majority of people who drink are surprisingly unaware of the recommended daily limit. A recent government poll showed more than a third of drinkers had no idea that the recommended daily limits are two to three units for a woman and three to four for a man.

So, what are the effects of alcohol? Well, aside from the immediate effects of drinking too much, including vomiting and headaches, binge drinking and prolonged heavy drinking over longer periods of time can have far more significant effects on the human body including:

- Brain damage
- Cancer
- Liver problems
- Stomach problems
- Kidney problems
- Impotence in men
- Osteoporosis
- Weight gain
- Red and blotchy skin
- Mental health problems
- Unwanted pregnancies and STDs

Worryingly, there is lack of awareness about the risk of serious, irreversible liver damage known as cirrhosis, which can be caused by excessive alcohol consumption and the false assumption

that the liver will issue some kind of ‘alert’ to warn us that it’s in trouble. However this is not the case. In a recent poll² led by The London Clinic, nearly half of those surveyed wrongly thought that their skin would turn yellow to warn them that they were in the early stages of liver disease from alcohol. 60% did not even realise that if their liver stopped working, they would be dead within days or weeks without urgent medical attention.

Due to numerous factors such as the increased availability of alcohol, cheaper alcohol and longer opening hours in bars and pubs, liver cancer cases have actually tripled in the UK in the past 30 years³. Liver experts suspect that many drinkers are unwittingly putting themselves at risk of liver damage by consuming more alcohol than they actually realise and drinking more over a longer period of time, especially at home.

Professor Rajiv Jalan, Professor of Hepatology at University College London and Consultant Hepatologist at The London Clinic Liver Centre says “The increase in liver diseases and liver cancers is very alarming. What most people do not realise is that alcohol can contribute to many other types of cancers such as mouth, breast and bowel cancer. Luckily, there has been much research and a number of developments in the prevention and treatment of liver disease over recent years which can help us to diagnose and

prevent liver damage at an earlier stage. This means that those affected by liver disease now have a much higher chance of recovery than ever before. However, such advances should not lead to a false sense of complacency. The only way to prevent liver damage is to drink alcohol within the known safe limits.”

Detecting the disease – The Fibroscan[®] is a relatively new test that measures fibrosis - the build-up of tough, hardened scar tissue from liver disease. This kind of damage can occur ‘silently’, but with the Fibroscan[®] doctors can pick it up early and start treatment to limit further damage. It works by passing a mechanical pulse through the skin and into the liver. Ultrasound is then used to measure the speed at which this pulse travels. Tough, fibrous tissue slows it down and gives vital clues to early liver damage. This method is probably the least invasive test available today, allowing the patient to return home or back to work immediately afterwards.

Professor Jalan continues, “We would recommend that if you have any risk factors for liver disease such as excessive alcohol use, obesity, previous drug abuse, a family history of liver disease, diabetes or a possibility of having viral hepatitis, you should have a liver health check, which incorporates a blood test, the Fibroscan[®] and a consultation with a consultant hepatologist.”

Healthcheck

Eyes – The windows to your soul... and your health



Next time you're putting yourself through a gruelling gym workout, or avoiding that last piece of chocolate cake, you may be pleased to know it won't just be of benefit to your waistline. A healthy lifestyle is crucial in keeping your eyes healthy and helping to ensure a lifetime of good vision.

Ms Gilli Vafidis, Consultant Ophthalmic Surgeon at The London Clinic Eye Centre, describes those lifestyle factors that can greatly influence eye health:

- Smoking can contribute to your chances of wet AMD (age-related macular degeneration), thyroid eye disease, abnormal ocular circulation (a risk factor for most ageing eye conditions) and retinal vein blockage (which causes blood flow to cease and damages eyesight)
- A high fat and carbohydrate diet encourages high blood pressure associated with damage to retinal circulation by leaked fluids and fats obstructing central vision. Alternatively, a diet rich in antioxidants – fresh fruit and vegetables - and yellow lutein pigments - egg yolk and

yellow peppers - help protect the delicate nervous tissue from harmful effects of UV light. Spinach and other dark green vegetables have a special role in protecting from age-related macular disease as they contain xanthine and carotenine minerals

- Obesity and a lack of exercise contribute to poor circulation in ocular blood vessels. This can result in a resistance to insulin and the development of diabetes, with all the consequent eye-related problems of earlier onset of cataract and diabetic retinopathy - where fine retinal capillaries are damaged by abnormal sugar levels and if untreated may cause blindness

Ms Vafidis comments: "Of course, not all eye problems can be directly related to lifestyle, but

taking preventative measures early on greatly reduces your chances of developing common, yet serious eye conditions in later life, especially if there is a genetic susceptibility."

A straightforward vision test is always recommended as a first port of call for any eye-related problem. Should further tests be required, The London Clinic's dedicated Eye Centre uses the latest diagnostics and treatments for eye disorders which include:

- Fluorescein and Indocyanine Green Angiography - to provide images that allow consultants to monitor age-related macular degeneration and diabetic retinopathy
- Optical Coherence Tomography (OCT) – is used in the diagnosis of glaucoma and retinal disease, by examining retinal thickness and structure
- Anti-VEGF injections – newly available drugs are showing encouraging results in the treatment of wet age-related macular degeneration
- Photodynamic Therapy (PDT) – a treatment used for patients suffering from wet age-related macular degeneration. PDT is a combination of an intravenous drug infusion and laser treatment that aims to slow the progression of vision loss

Ms Vafidis adds: "Exciting developments with Anti-VEGF drugs could see them being used for other conditions aside from wet age-related macular degeneration, to include the leakage resulting from diabetic damage and other macular conditions. New micropulse lasers under trial may have the potential to treat early age-related maculopathy to prevent vision loss and to minimise scarring caused by standard laser therapy in diabetic retinopathy. But, perhaps the most anticipated new development in the refractive field is the use of microwave energy to change corneal shape as a treatment for refractive error and for presbyopia – the need for reading glasses with increasing age – without cutting and laserising tissue."

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- One of the UK's leading independent hospitals • Located on Harley Street in the heart of London's medical community
- Long-standing international reputation attracting leading consultants
- Highly complex procedures in addition to routine surgery and medicine • 24 hour consultant-led Intensive Care Unit

Healthcheck is compiled by The London Clinic Press Office team.
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