How do weight, obesity, and BMI affect the hips and knees?

Post-operative outcomes

- If you are obese and are scheduled for an outpatient surgery, you are more likely to need to stay at the hospital overnight for additional care and monitoring.
- On average, obese patients stay in the hospital longer after surgery than non-obese patients and are more likely to go to a rehabilitation center instead of home after surgery. Obese patients are also more likely to
- go back to the hospital for an emergency room visit or to be readmitted after surgery. Finally, if you are obese, you may need to be prescribed different or
- additional medications compared to someone who is not obese.

Complications

Obesity has been shown to increase a person's risk of having a medical or surgical complication after joint replacement, such as wound healing problems and infection. Treatment of some of these complications can include one or more additional surgeries and are potentially limb or life-threatening issues. Therefore, it is essential for your BMI to be at an optimal level before having a hip or knee replacement.

Diet is essential to take care of health

A joint replacement can relieve pain and help you live a fuller, more active life.

Once you and your doctor have determined that joint replacement is right for you, you will need several weeks to prepare, both physically and emotionally. By planning ahead, you can help ensure a smooth surgery and recovery.

For more information visit: www.Miamiorthodoc.com

www.LarkinHealth.com

"Watch your health"

OBESITY, WEIGHT LOSS, AND JOINT REPLACEMENT SURGERY



What is obesity?

Obesity is the excess accumulation (build-up) of fat at a level that poses a risk to a person's health. Obesity is increasing both worldwide and across the U.S. in both the general population and people undergoing total hip and knee replacement. In fact, studies show that obesity increases the likelihood of total hip and knee replacement in adults ages 18 to 59.



What is BMI?

Body mass index, or BMI, is a ratio that compares a person's weight to their height. BMI is calculated as:

BMIs are sorted into the following ranges:

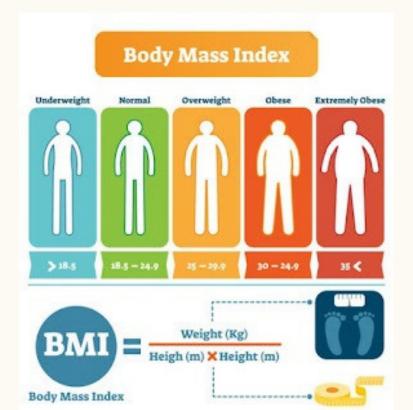
ВМІ	World Health Organization (WHO) Classification
Below 18.5	Underweight
18.5 to 24.9	Normal weight
25 to 29.9	Overweight
30 to 34.9	Class I obesity
35 to 39.9	Class II obesity
40 and above	Class III obesity

A person's BMI is simply a way to compare a patient's weight to other people of the same height; it cannot reveal everything about that person. BMI does not directly indicate the person's body fat percentage, muscle mass, or other health problems.

How do weight, obesity, and BMI affect the hips and knees?

The joints in our legs carry the weight of our bodies every day when we do our normal activities, such as walking, standing, running, and climbing. Because of our anatomy, the forces experienced across the joint surfaces inside our hips and knees can be more than 7 times our body weight.

The more weight we carry around, whether it is muscle or fat, the greater the load on our hips and knees. This is one reason why heavier people are more likely to require total hip and knee replacements than patients with normal BMIs, and why the risk increases as your BMI increases. Losing weight, or keeping your weight at a healthy level, can help improve hip and knee pain symptoms, as well as help prevent or delay a hip or knee replacement.



How can I reduce my risk of having a complication from hip or knee replacement?

Weight Loss

Healthy weight loss, while not easy, has many health benefits in addition to making surgery less risky — including possibly preventing or delaying the need for joint replacement.

Improving Your Overall Health

Addressing other risk factors and improving your overall health will make it more likely that you will have a successful joint replacement with fewer complications:

- If you smoke, it is recommended that you stop smoking at least 4 weeks prior to surgery to decrease your risk of complications, such as problems healing your incision or an infection.
- If you have diabetes, improving your blood sugar control can also help decrease your risk of an infection after surgery.
- Improving the fitness of your heart and lungs and keeping your blood pressure under control can help reduce your risk of medical complications. Cycling, swimming, water exercises, or using an elliptical machine are excellent low-impact activities that minimize the loads placed on the hip and knee joints.
- Ensure that your diet has enough healthy nutrients, including vitamins, minerals, and protein to promote healing after surgery.

Some risk factors, such as age and family history, are beyond your control. But there are many things you can do — including and beyond losing weight — to improve your health, reduce arthritis symptoms, and, if you do need joint replacement, help make your surgery a success.