

Frequently Asked Questions: Meniscus Surgery

1. What is a meniscus?

The meniscus is a fibrocartilage cushion that helps to distribute weight between the two bones of the knee (femur and tibia). It is an avascular structure that has a very poor capacity for repair. The meniscus helps to prevent knee arthritis by performing this cushioning function.

2. What is a meniscus tear?

It very common for the meniscus to tear or to separate from its normal attachment on the knee joint capsule. Unfortunately, once a meniscus tears, the resultant tears do not heal. Put simply, the meniscus tears rarely can heal once they occur because there is a very poor blood supply. As such, most meniscus tears will not heal, and this is why many affected patients will opt for a surgical solution.

3. Why do you remove meniscus as opposed to fixing it?

Again, the meniscus is largely avascular. And even though I am able to suture most types of tears of the meniscus, there is no expected healing response because there is no blood supply in the area. The healing of soft tissues in our bodies requires that there be a rich blood supply that supports the carriage of healing molecules to the site of injury. No blood supply means that most meniscus tears will not heal, even if sutures are used to “fix” the noted area of tearing. Dr. Williams will determine at the time of surgery if your meniscus is repairable. His primary goal is to preserve as much meniscus tissue as possible while treating your meniscus problem.

4. How much meniscus do you remove?

Typically, I will remove as little meniscus as possible that will treat the problem. Usually this means that patients who undergo a partial meniscectomy will still have around 80% of their meniscus once the surgery is complete. Some types of tears will require a more extensive resection, but fortunately this is very rare.

5. What happens if you can actually fix the meniscus?

Fixing the meniscus requires that sutures are place to hold the torn meniscus area together. This, in turn, requires that the knee be partially immobilized immediately after surgery. You will need to wear a brace for about three weeks following a repair, and use crutches for the first week. Although this extends the rehab duration a bit, the meniscus volume is preserved.

6. How long do I need to do PT for a meniscus surgery?

Approximately 6 weeks for a partial meniscectomy (removal).
Approximately 12 weeks for meniscal repair.

7. When do I return to the office?

Partial meniscectomy patient return to the office at the 6 week mark following surgery. Meniscus repair patients will come back to the office at the 6 and 12 week marks following surgery. The first and second post-operative appointments should be made when a date for surgery is confirmed.