

OUR PHYSICIANS:



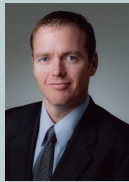
Steven A. Barrington, M.D.
General Orthopaedics
Total Joint Surgery
Board Certified
Fellowship Trained



Michael E. Davis, M.D.
General Orthopaedics
Spine Surgery
Board Certified
Fellowship Trained



Charles Hartzog Jr, M.D.
General Orthopaedics
Sports Medicine
Board Certified
Fellowship Trained



Michael Manning, D.O.
General Orthopaedics
Total Joint Surgery
Board Eligible
Fellowship Trained
Coming August 2010



Edward Palmer, M.D.
Hand Surgery
General Orthopaedics
Board Certified



D.D Thornbury, M.D.
General Orthopaedics
Foot and Ankle Surgery
Board Certified
Fellowship Trained



G. Dexter Walcott, Jr, M.D.
General Orthopaedics
Sports Medicine
Board Certified
Fellowship Trained



Thomas G. Wells, M.D.
Total Joint Surgery
General Orthopaedics
Board Certified

Joining our practice August 2011
Hussein Turki, M.D.
Hand Specialist



ALABAMA ORTHOPAEDIC SPECIALISTS, P.A.

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Management of Arthritis in the Knee and Hip

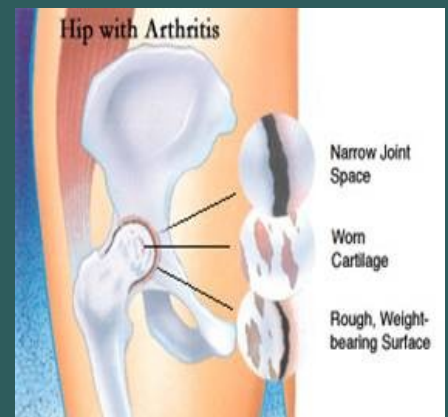
Steven A. Barrington, M.D.

Arthritis of any joint, especially one in the lower extremity, can be an extremely debilitating condition. Many options are available for treatment, depending primarily on the severity and location of the arthritis. Our goal at AOS is to return your patient to their maximal functional level, with the least invasion possible. Let's look at what some of the options might be.

Arthritis in the hip is a common problem. One of the most important aspects of treating hip arthritis is to assure, as much as possible, that the pain is actually being caused by hip arthritis. Other common causes of pain around the hip that can be easily mistaken for hip arthritis are low back pain, pinched nerves from back related disorders, hip bursitis, and hip tendonitis. A hip exam and X-Rays can reveal much of the source of hip discomfort. Occasionally, an MRI is required to evaluate for other potential problems. Once the diagnosis is confirmed, treatment can be individualized and clarified for each patient. As an example, treatment for hip bursitis or tendonitis consists primarily of specific physical therapy exercises and anti-inflammatory medications. Steroid injections can also be used as a treatment option, but must be limited.

If arthritis of the hip is the cause of your patient's pain, several options still exist. Conservative treatment for hip arthritis includes use of a cane or walker, activity modification, glucosamine and chondroitin sulfate supplements, and anti-inflammatory medications. When those no longer are adequate to control their discomfort, and the patient is not able to do the things they would like because of pain, a hip replacement has been proven to be a good, reliable option for helping relieve the pain from the arthritis.

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Satellite Clinics

Alabama Orthopaedic Specialists has satellite offices in Prattville, Greenville, Wetumpka and Troy. Our satellite clinics in addition to our main campus in Montgomery provide our Central Alabama patients the opportunity to visit their orthopaedic surgeon where it is convenient for them.

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For an appointment, call : (334) 274-9000



Our office

locations:

**4294 Lomac Street
Montgomery, AL**

**100 Adams Ave
Greenville, AL**

**461 East Main St
Prattville, AL**

**1350 Hwy 231 S
Troy, AL**

**74238 Tallasse Hwy
Wetumpka, AL**

To schedule an appointment:

(334) 274-9000

**Ron O'Neal, MPH,
FACHE– Administrator**

**Scott Gulley, CPA–
Controller**

**Michelle Lowrey Perdue,
Human Resource Director**

Satellite Clinics-Continued

Our satellite clinics offer assessment and diagnosis to the patient and post surgery follow up requirements such as cast removal and arranging care and rehabilitation with any local resources.

Dr. Michael Davis visits our Greenville, Alabama clinic every other Monday. Dr. Thomas Wells sees patients every Friday in Troy and every other Thursday in Wetumpka. Dr. D.D. Thornbury and Dr. Steven Barrington are in our Prattville clinic every other Monday and Wednesday.

All patients are seen by appointment only. When making an appointment for your patient, please be sure to give them a preference of which location you would like your patient to be seen at.

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Arthritis of the knee is also a common problem. One common source of knee pain that is mistaken for arthritis is a torn meniscus, which is a shock-absorbing cartilage between the two main bones of the knee. Often, arthritis and a torn meniscus are seen together. If non-operative measures have failed to relieve the pain, and the arthritis does not appear to be too severe, arthroscopic surgery may be an option. However, arthroscopic surgery is not designed to cure the pain of arthritis, and it may not offer complete relief of your patient's pain. A knee replacement is a more reliable operation at relieving the pain from arthritis, but individual preferences and differences in severity of arthritis (i.e. the worse the arthritis, the less likely arthroscopy will help) dictate individualized treatment. Some patients can benefit from partial knee replacements, if their arthritis is isolated, their ligaments are intact, and stiffness is limited. Most patients, because of multiple factors, including stiffness, location of the arthritis, and ligament issues require a total knee replacement when arthritis surgery is required.

Conservative treatments for knee arthritis are the same as for hip arthritis, with an added emphasis on therapy. Many patients are surprised at the amount of pain relief that muscle strengthening can have in the face of mild to moderate arthritis. Injections are also an option for knee arthritis. As with hip bursitis, steroids can occasionally be utilized, and a synthetic joint fluid replacement, can sometimes offer temporary relief, depending on the specific location of the arthritis (it doesn't work well for arthritis behind the kneecap).

Ultimately, our goal at AOS is to get your referred patient going as rapidly as possible, and keep them going as long as possible.

