

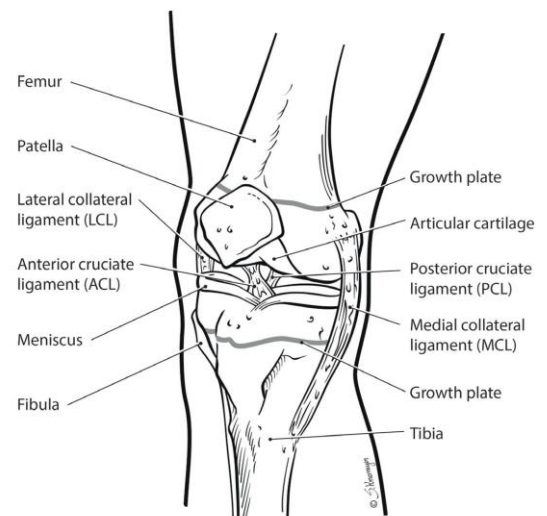


Meniscus Tears

Meniscus tears are common injuries. The meniscus is the rubbery cartilage disc between the tibia (shinbone) and femur (thighbone). It acts as a shock absorber in the joint (Picture 1). The meniscus helps provide stability in the knee.

Common Causes of Injury

- Meniscus tears often happen when playing sports. They can be caused by a direct blow to the knee or by twisting or turning the knee. A patient who tears their anterior cruciate ligament (ACL) may also injure their meniscus.
- Some children are more likely to have a meniscus tear than others. This is because of a structural issue like an oddly shaped meniscus, known as a discoid meniscus.



Picture 1 Bones and ligaments in the knee.

Signs and Symptoms

Common signs and symptoms of meniscus tears include:

- pain
- swelling
- hearing a popping sound
- feeling the knee locking or catching when moving

Diagnosis

If the health care provider thinks there may be an injury to the meniscus, they may have you wait a few days before scheduling an appointment. This lets the swelling to go down and will make the exam easier and less painful. At the appointment, an orthopedic provider will check your child's knee for injuries.

- Your child may have a meniscus injury if it hurts when the provider moves their knee.

- They will order an X-ray to check for injuries to the bone. Since the meniscus is made of soft tissue, a tear in the tissue will not show up on an X-ray. The provider may order a magnetic resonance imaging (MRI) test to check the meniscus.
- There are two types of meniscus tears:
 - A **nondisplaced (small/stable) meniscus tear** may be treated with bracing, physical therapy, and other non-surgical treatments.
 - A **displaced (large or unstable) meniscus tear** requires surgery. It is usually scheduled within a few weeks of your child's injury and after all testing is complete.

Initial Treatment

- R.I.C.E. – Rest, Ice, Compression, Elevation
- knee brace
- crutches
- Pain relievers, such as Motrin® or Tylenol®. Motrin helps reduce pain and swelling. It can be taken every 6 hours. Tylenol may also help with discomfort. It can be taken every 4 hours. These medicines can be alternated every 3 hours as needed for pain control.

Surgery

Surgical procedures used to treat a meniscus tear include:

- A partial meniscectomy, which is when the frayed tissue is trimmed out.
- A meniscus repair, which is when the two ends of the tear are sewn back together.

The best choice for your child will be based on the type of tear. This will be explained in detail to you by the orthopedic surgeon.

After Surgery

- Brace and crutches – Your child will use crutches and wear a hinged knee brace to help support the knee and help with balance. They will be taught how to use the crutches and brace. It is important that they use them as instructed.
- Ice – You and your child will be taught how to use the ice machine. Your child should use the machine regularly for the first 24 to 48 hours after surgery to help reduce swelling. After 48 hours, they may begin using it off and on for 30 minutes at a time, and then 3 to 4 times a day until the swelling lessens.

- **Pain Medicine** – Your child will get a prescription for pain medicine. The provider may suggest that you add Motrin and Tylenol for pain relief as well. Using these medicines may help with swelling. They will also help your child get off prescription pain medicine faster.
- **Exercises** – Your child will get exercises to do. The muscles at the site of surgery will be weak, but it is important for your child to do these exercises. They help build up the strength of the leg muscles, which helps with healing. At the first appointment after surgery, your child will get a prescription for physical therapy. They should start physical therapy as soon as possible after their first follow-up appointment. This is usually 1 to 4 weeks after surgery. The exercises at home and in physical therapy will help your child recover quicker and reduce swelling.

Activity and Diet

- The health care provider will talk with you about what activities your child can and cannot do. Your child should not:
 - run
 - jump
 - play contact activities
- Your child cannot take part in sports or gym class until their provider says it is okay.
- Your child should only do activities approved by their provider or physical therapist.

If you have questions about what your child can or cannot do, call their health care provider.

Follow-up

Your child's first follow-up appointment will be about 1 week after surgery. At this time, a provider will check the incisions and any dressings (bandages) will be removed. You can talk to your child's care team about pain or other concerns.

When to call the health care provider

For questions, call the orthopedic clinic in Columbus at (614) 722-5175 or Toledo at (419) 251-2061.

Call the clinic if your child has:

- pain that gets worse
- a new rash
- chills
- fever higher than 101 Fahrenheit (F) or 38.3 Celsius (C) by mouth