

## ***KNEECAP OR “PATELLOFEMORAL” PAIN***

*What you need to know...*

Pain that arises from the kneecap (or “patella”) is a **common and frustrating problem**.

It is a frustrating problem because it is hard to cure completely and because the pain tends to come and go.

We try to do everything that we can to control these symptoms **WITHOUT surgery**.

**There are 4 main parts of non-surgical treatment:**

### **1) Avoid Activities That Place High Loads on the Kneecap**

When the knee is loaded in a bent position, very high forces are placed on the kneecap. Try to avoid climbing stairs and squatting if at all possible. Never perform knee extension exercises (straightening the knee against resistance) if you have a sore kneecap. Step aerobics and stair-climbing devices should also be avoided.

### **2) Exercise/Physical therapy:**

Many people with kneecap pain have kneecaps that tilt toward the outside of the knee. With proper exercise, the tilting can be lessened and pain will often improve. However, it takes a minimum of 6 weeks to see any results from the exercise program. You can often learn the exercises in 2-3 visits to a therapist.

### **3) Knee Braces**

Braces may help control pain and they are often tried in the early phase of treatment. The brace is designed to make you feel better. If it doesn't make you feel better, don't wear it.

### **4) Anti-inflammatory medication**

These are modified forms of aspirin which help reduce inflammation if taken regularly. Kneecap pain can be thought of as a mild form of arthritis, and these medications are commonly used to treat arthritis. The medication must be taken for 3-4 weeks on a daily basis to be most effective. These medications can be obtained over-the-counter (Alleve, Motrin, Advil) or with a prescription (Naprosyn, Mobic, Daypro, Indocin etc.). Their most common side effect is stomach irritation and they should be used cautiously if you have had problems with heartburn or ulcers.

The treatment outlined above will control the symptoms of more than 85% of patients with kneecap pain. We recommend a **minimum of 3-6 months of exercise** before considering other (i.e., surgical) options.

The results of surgery for kneecap pain are less predictable than the results for other knee problems. The success rate for kneecap surgery is between 60% and 80% compared to better than 95% success for cartilage injuries. As a result, no one should consider kneecap surgery unless they are willing to accept the risk that they could undergo an operation and have no improvement. **Surgery for a kneecap problem should be considered a last resort** in someone who has not improved after 3-6 months of exercise.

*-Michael J. Pagnani, MD*