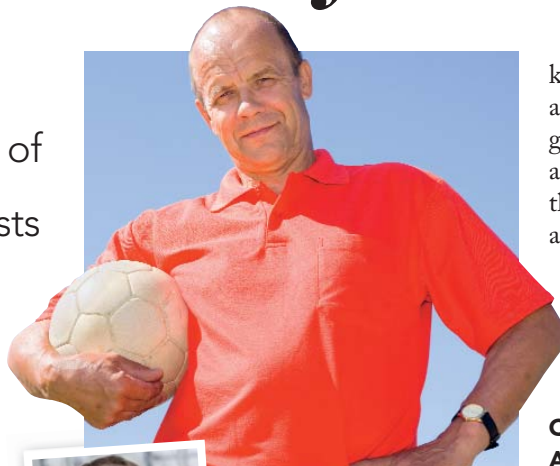


A team to solve sporting injuries

When a twisted knee turns serious, a group of Bolton-based specialists are on hand to help.

Jeremy Jarratt explains the service



Jeremy Jarratt

With an action-packed summer of sport on the horizon, more and more people will be following suit by dusting off their kit and trying to get fit.

That's great - any doctor will tell you that we all need more exercise. But strenuous activity can sometimes lead to problems and sport injuries are no respecter of age, gender or ability.

Anterior cruciate ligament (ACL) injuries are often discussed in the media. They are a nightmare for any footballer preparing for the World Cup but it can afflict us mere mortals, too.

If the unthinkable does happen to you, expert help is at hand. Bolton Orthopaedic and Sports Surgery (BOSS) is a group of nine local consultant orthopaedic surgeons, who joined forces to offer a comprehensive service for patients with bone, joint and sports injury problems.

BOSS is able to offer prompt, expert assessment and planned treatment for all orthopaedic conditions from the elite sportsman to 'weekend warriors'. They are also used to dealing with wear and tear injuries as well as arthritic problems.

One of the team, Jeremy Jarratt specialises in hip and knee surgery. Here, he explains about ACL injuries.

Q. I injured my knee playing football and my doctor says I may have torn my anterior cruciate ligament. What does this mean?

A: The ACL is a ligament within the middle of the knee joint. It prevents abnormal movement of the tibia (shin bone) and femur (thigh bone). It is commonly injured during twisting movements, and is most often seen after a football or skiing injury. As the knee twists abnormally a loud pop or snap may be heard and the knee is very painful and swells almost immediately. Other structures such as the medial collateral ligament (MCL) or one of the cartilages within the knee may be damaged at the same time. Immediate treatment requires rest, ice and elevation, but medical attention should be sought as soon as possible.

Q. Will I need surgery?

A: Surgery is not always required. It depends upon your level of sporting activity, your age and how unstable the

knee is. Some may be stable with daily activities, some may require surgery to get back to their normal level of sports activity and some will need it because the knee is unstable with normal daily activities. Physiotherapy is required and is an important part of the preparation, if surgery is required.

The decision on surgery requires detailed discussion with your consultant.

Q. How do you repair the ligament?

A: The ligament can't be repaired. The ACL is reconstructed using tissue from elsewhere - most commonly using two of your hamstring tendons or part of the patella tendon from your knee. It is most often done by arthroscopic (keyhole) surgery. Intensive physiotherapy is then required.

Q. When will I be back to sport?

A: You will recover from the initial effects of surgery in about six weeks, but return to sports will take between six and nine months and must be supervised by the physiotherapist.

Q. How soon should I have surgery if I need it?

A: It is generally better to operate sooner, although a few weeks for the swelling and inflammation to settle is usually advised. You should consult a specialist early if you have had a knee injury that causes significant swelling. 🦿

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