

Arthritis & Joint Insight

A publication by Dr. Robert L. Lock, II

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Hip Replacement Recalls

The truth in the advertising

Over the last several months I've received many questions from colleagues, patients, and friends about recalled joint replacement components. For the most part, patients have heard about the recalls from advertisements they've seen on television or read in the newspapers. These ads have been exclusively run by personal injury attorneys looking for potential clients who may have had a recalled component implanted as part of a joint replacement surgery. Most recently I've been asked most commonly about the DePuy™/Johnson and Johnson™ hip recall. To be accurate, the recall was voluntarily issued by the Johnson and Johnson company, not by the FDA (Food and Drug Administration).

First, let me briefly discuss the process by which joint replacement components are brought to market. Like any new drug or medical device, a new joint replacement component must undergo rigorous testing in both the lab and with patient scientific trials before it can ever be brought to the market for widespread use in patients. Ultimately, the decision to allow widespread distribution and use is made by the FDA. I am currently serving a four year term as a consultant to the FDA for advice on new orthopedic devices. The DePuy™ cup used in hip replacement surgery, which is the recently recalled device, underwent this rigorous testing before its introduction to the orthopedic community for general usage.

Because the practice of medicine and surgery is, to a great extent a scientific endeavor, we continually procure and update the data regarding how these devices are functioning in large patient populations. In the case of the recalled DePuy™ hip component, some studies particularly from the European literature, began to show some potential problems with early wear, loosening, and adverse tissue reactions. After these studies began to surface, the company ultimately made the decision to pull the component off the market until further studies

regarding safety could be completed. It is usually at this point when the attorneys get involved with class action lawsuits against the company.

To be even more specific, the general type of hip replacement at the center of this controversy is what we call a "metal on metal" design. This means that, instead of the traditional metal ball moving inside a plastic cup in the hip replacement, there is instead a metal ball articulating against a metal cup surface. Interestingly, this metal on metal design had been used very successfully in Europe for almost two decades before its introduction into the U.S. patient population. Moreover, although the only metal on metal device recall has been with the DePuy/Johnson & Johnson company, all of the major industry manufacturers of joint replacement components make metal on metal hip replacements. Currently, there is some degree of concern across the industry that the problems with metal on metal hips may not be company specific. Rather, it is possible that there may be inherent issues regarding the entire metal on metal concept in general. Suffice it to say, this is an area of intense study in orthopedics at this time. Although metal on metal hips continue to be implanted across this country and the



A Message from Dr. Lock



Welcome to another edition of *Arthritis & Joint Insight*.

I'd like to thank our guest contributor, Anna Harris, for her story on Curves. A special thank you to Wanda Richardson, owner of Kingman Curves, as well as all the ladies who participated in the story. I had the opportunity to speak to their group last

May on Exercise and Arthritis and their stories of weight loss were inspiring.

A special thank you to Rodger Prince, who shared his story after undergoing total knee replacement this past fall. My wife, Lesa, enjoyed interviewing him and learning about all of his adventures and travels around the world.

On the back cover we have listed the website where you can view myself and Edmund performing the non-muscle cutting hip replacement using computer navigation. This is the video that we shot for ORLive last August at Hualapai Mountain Medical Center.

I hope that you enjoy the latest edition of *Arthritis & Joint Insight*.

Robert L Lock, II, DO, FAOAO

www.arizonajointreplacement.com

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Inquiries: Please send correspondence to our Bullhead City office location or call 928-758-1175 to speak with a representative from Tri-State Orthopedics. Patients interested in appearing in "Tell your Story" should email drrobertlock@yahoo.com or call 928-234-5773 for more details.

world, the numbers of these implants being inserted has dropped dramatically over the last few years because of some of these concerns.

To make this issue even more confusing, we still do not know whether the concept of metal on metal hips is flawed or whether there might be other factors at play. Clearly, we know of thousands of patients with metal on metal hips who are functioning at very high levels with little or no pain in their hips. Could there be issues of implant malposition which may predispose to problems, or might there be patient specific immunologic differences which cause one to react to the metal particulate generated by these hips, while another patient sees no reaction from this design. It will likely be many years before these issues are fully sorted out.

In my own practice I have not implanted a metal on metal hip for approximately 3 years now. This is not because I consider it a flawed design concept, but rather because I am waiting until further data is collected regarding the safety and efficacy of these devices on the long term. Although the personal injury attorneys are certainly going to great lengths to impugn the metal on metal design, we in the scientific community realize that their conclusions are premature—at best, as we in the orthopedic community are still working diligently to not only determine the source of individual problems, but whether there truly IS a problem with these devices. To be clear, the final chapters on this story have yet to be written.

Finally, for any patient who may have a concern about their own hip replacement, I would recommend seeing an orthopedic surgeon. A simple x-ray will determine whether or not you have a metal on metal design hip replacement. If you do, this does not mean problems or revision surgery are imminent. It simply means your orthopedic surgeon may want to do yearly follow-ups to look for any potential problems as we do with virtually all joint replacement patients.

For up to date information on recalls by the Food and Drug Administration log on to:

<http://www.fda.gov/Safety/Recalls/default.htm>

By selecting the tab "Medical Devices", you will be able to see what devices are currently under recall.



Arthritis Prevalence Increases

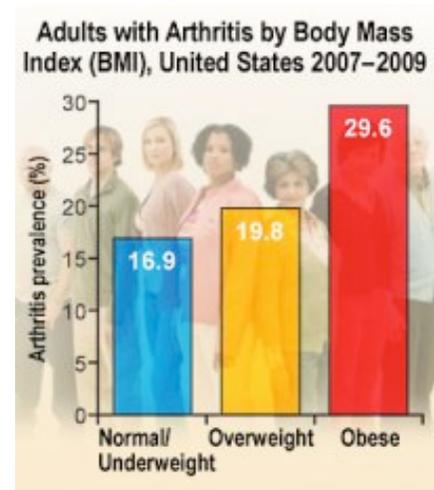
Obesity Plays Strong Role

The Centers for Disease Control and Prevention (CDC), in Atlanta, Georgia, issued an updated report on the prevalence of arthritis in the October 8, 2010 issue of the *Morbidity and Mortality Weekly Report*. The report confirms that arthritis is a significant public health problem that is growing.

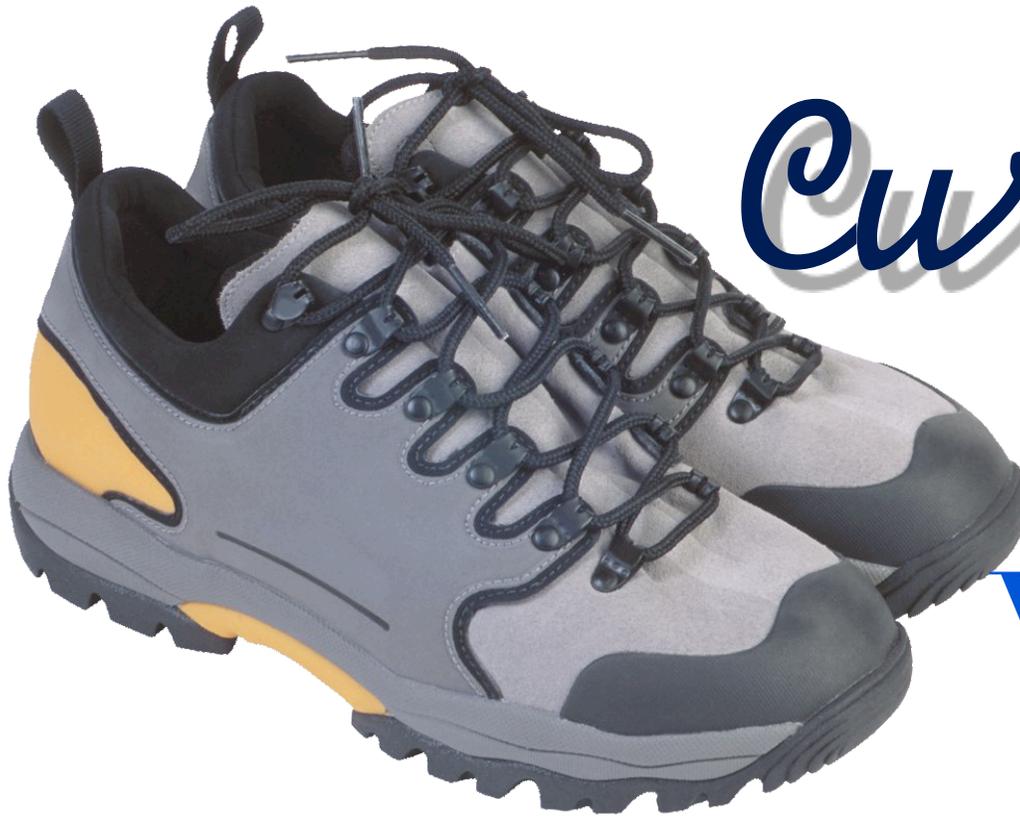
The updated information was based on an analysis of National Health Interview Survey Data from 2007-2009. The findings revealed that nearly 50 million adults (age 18 or older) have self-reported doctor-diagnosed arthritis. That's 22.2% of the US population -- and up from 46 million adults reported in 2003-2005. There was also an increase in the number of people with arthritis whose ability to perform certain daily activities is affected or limited by having arthritis - 21 million in 2007-2009 compared to 19 million in 2003-2005.

Obesity was highlighted in the report as being a contributing factor for arthritis, especially osteoarthritis. About 29.6% of obese adults, 19.8% of overweight adults, and 16.9% of normal/underweight adults have arthritis.

Obesity places extreme weight loads across the joints. These increased loading forces cause accelerated joint wear.



Data source : Cheng YJ, Hootman JM, Murphy LB, Langmaid GA, Helmick CG. Prevalence of doctor-diagnosed arthritis and arthritis-attributable activity limitation — United States, 2007–2009. *MMWR* 2010;59(39):1261–1265



Curves

Amaze Yourself

Story by Anna Harris

Curves was founded by Diane and Gary Heavin in 1992. They opened their first club in Texas which was quickly followed by a second club. Curves was a huge success with its 30 minute fitness program. The curves phenomenon spread like wildfire and franchises began popping up all over the country making Curves the fastest growing franchise in history.

There are currently over 10,000 clubs and more than 4 million members around the world.

What makes Curves so popular? It starts with the companies unofficial motto “no makeup, no men, and no mirrors.” Pair that with their 30 minute fitness program and add in friends, fun and knowledgeable staff and you have what many would say is the perfect “girls club”.

The price is affordable and comparable to other health clubs. Once you are a member, you can go to any club, anywhere. The flexibility is perfect for those who travel.

Curves 30 minute fitness concept includes strength training, sustained cardiovascular training and

hydraulic resistance. All are safe and effective for all ages and fitness levels from beginner to advanced. Their circuit workout goes between machine and cardiovascular activity. Each machine works at least 2 muscles at a time and is done for 2 minutes. While music adds to the fun atmosphere you will hear a beep when it is time to move on to the next station. During downtime between machines is when you get in your cardiovascular workout. Participants can do anything from walk in place to aerobic moves. Members do the circuit a total of two times which equals 30 minutes and end with a light stretch. “You get out what you put into it so that makes it perfect for everyone” says Curves of Kingman owner, Wanda Richardson .

Wanda joined Curves in 2004. She had great success with Curves and started working there in 2005. In 2009 she became the owner of Curves in Kingman “Curves changed my life and now I have the opportunity to change others lives” Wanda says. She not only impacts the lives of those who are members but she also reaches out to those in the community and around the world. Curves in

Kingman is a strong supporter of the local area food bank in Kingman.

Recently Wanda kicked off the campaign “Free the Girls”, along with the Soroptimist Club in Kingman. Members donated new or slightly used bras to be sent to Africa to provide income opportunities for women and young girls who have been victims of abuse and violence.

The environment at Curves is like no other. It is a place to come and meet friends or even make new ones. It is also “a very encouraging place” says Kingman Curves member, Loretta Henderson. “Everyone is so supportive and non judging. You do not have to contend with guys and everyone is friendly and helps each other. That is what it is all about.”

Jessie Sandlin, 83, says “they cheer me up” when asked about seeing her friends at Curves. She also adds, “I would not miss seeing these gals for anything.”

Curves fitness program is very easy on the joints as well as being a total body workout. “It is the closest thing to a water workout that you will find without getting in the water,” states Wanda, Kingman curves owner.

Alma J. Walker, 71, has been a member of Curves in Kingman, AZ for 4 years. Since becoming a member she says “Curves has been life changing. My overall quality of life has changed. I have so much energy that I can even do yard work now. I no longer have pain in my joints. I have built muscle, gained overall strength and lost fat. I could not even lift a dish before I started curves. Everyone even comments on how great I look now.”

Curves recently partnered with Zumba® fitness to bring another exciting element to the workout routine at Curves. To learn more about the program call a local club near you or stop by for a tour of the facility.



www.curves.com

Find a location near you:

Kingman, Arizona

3531 N. Moore St

(928) 692-0011

www.kingmancurves.com

Bullhead City, Arizona

1751 Hwy. 95, #183

(Safeway Shopping Center)

(928) 704-4191

Fort Mohave, Arizona

5225 Hwy. 95, #10

(928) 788-3808

Lake Havasu City, Arizona

2126 McCulloch Blvd.

(928) 854-9293

Needles, California

1806 Needles Hwy.

(760) 326-6364



The Adventures of Prince

-and the knee that tried to get in the way.

Rodger Prince is just 63 years young but has already had enough adventures to fill a lifetime or two. As a Safety Specialist, currently residing in Valdez, Alaska, Rodger earns a lucrative salary in a job that allows him the freedom and excitement to travel all around the world.

Rodger's many adventures have taken him deep water diving in the Philippines to sunken World War II Ships, and in close contact with great white sharks near Cape Town, South Africa. Although an avid scuba-diver, his love of adventure has taken him on land as well to include hang gliding in Costa Rica and atop a majestic elephant in Thailand. His job has taken him to other parts of the world as well including Europe's North Sea, Iraq, New Guinea, Russia, Poland, and Nigeria just to name a few.

A trip he hadn't planned to make was one to the operating room for a total knee replacement. On November 19th, 2010, Rodger went in for surgery at Hualapai Mountain Medical Center (HMMC) in Kingman, AZ, nearly three thousand miles from his home in the frozen north.

His childhood friends, the Teske's reside in Kingman. Once they heard their good friend was in need of a knee replacement they recommended Rodger come their way.

"My friend Tom is a golfer, and some of his golf-buddies have had this procedure and had great results. He told me that I could stay with them after the surgery and that they would take care of me," said Rodger.

Rodger looked at the website and then made a phone call to schedule his surgery. Due the difficulty of making phone calls from Valdez, he and Hope, Dr. Lock's surgery scheduler, communicated primarily through e-mails. Hope and Rodger co-ordinated flights, pre-operative work up, surgery dates and times all to fit in to his time frame and get him back on the job as quickly as possible.

Rodger was a college football player, who received a scholarship to Texas State. As the teams kicker, he tore the cartilage in his knee. In the time since that injury his knee joint has progressively deteriorated. More than forty years later, Rodger's knee was diagnosed as end stage osteoarthritis with bony erosion. The pain was "constant and irritating." When he was unable to get into a life boat, on a job in South Korea, he had to come home to Alaska. This missed opportunity was the tipping point for Rodger to seek out medical attention. "I knew there would be a point when I would not be able to work. For me, retiring just wasn't an option."

Rodger confesses to being a little anxious about surgery in the pre-operative holding area at HMMC. "I remember just telling them to knock me out and let's get this done," he said. He had post-operative pain but progressed well while in the hospital and was discharged home on the second post-operative day.

Once home with his friends, the Teske's, Rodger used his walker for about 2 days and then transitioned to a cane. Eleven days after surgery, his therapist told him that he wasn't using his cane right. "So I put it up. No point in caring it around if I can't figure it out."

Rodger was determined to regain his strength and function. His self-discipline and determined attitude was a driving force in his recovery. "I only take pain pills while I'm doing therapy. I use my friends' Nordic Track machine." At 1 month after the surgery, Rodger was already walking a quarter mile three times daily. He had 118 degrees of bend and was about 3 degrees from reaching full extension.

When asked what the hardest part of knee replacement surgery was for him he replied, "I've been in pain for 40 years, so the way I feel now is good. The hardest part was driving from Valdez to Anchorage in the winter. I guess I can't complain too much, it did warm up to -5 during the drive."

Six months after his surgery, Rodger is back in Alaska and enjoying watching the last bit of snow finally melt away. He is pleased with his results and is using his new knee to swim, bike and even climb stairs. "It feels quite natural." He plans to put his knee to test as his travels will soon be taking him to Abu Dhabi or Finland. For this world traveler, either would be great.



Pictured Above: Rodger Prince during his follow-up appointment after total knee replacement surgery at Hualapai Mountain Medical Center.

Garlic & Onions may keep away Arthritis new large scale study reveals

Researchers have discovered that women who consume a diet high in allium vegetables, such as garlic, onions and leeks, have lower levels of hip osteoarthritis.

The findings, published in the *BMC*

Musculoskeletal Disorders journal, not

only highlight the possible effects of diet in protecting against osteoarthritis, but also show the potential for using compounds found in garlic to develop treatments for the condition.

The study looked at over 1,000 healthy female twins, many of whom had no symptoms of arthritis. The team carried out a detailed assessment of the diet patterns of the twins and analyzed these alongside x-ray images, which captured the extent of early osteoarthritis in the participants' hips, knees and spine.

They found that in those who consumed a healthy diet with a high intake of fruit and vegetables, particularly alliums such as garlic, there was less evidence of early osteoarthritis in the hip joint.

Dr Frances Williams, at King's College London, says: "It has been known for a long time that there is a link between body weight and osteoarthritis. Many researchers have tried to find dietary components influencing the condition, but this is the first large scale study of diet in twins. If our results are confirmed by follow-up studies, this will point the way towards dietary intervention or targeted drug therapy for people with osteoarthritis."

Reference:

King's College London (2010, December 16). Garlic could protect against hip osteoarthritis. *ScienceDaily*.



Inside the Operating Room~

Scrubs, Mask & Goggles Not Required

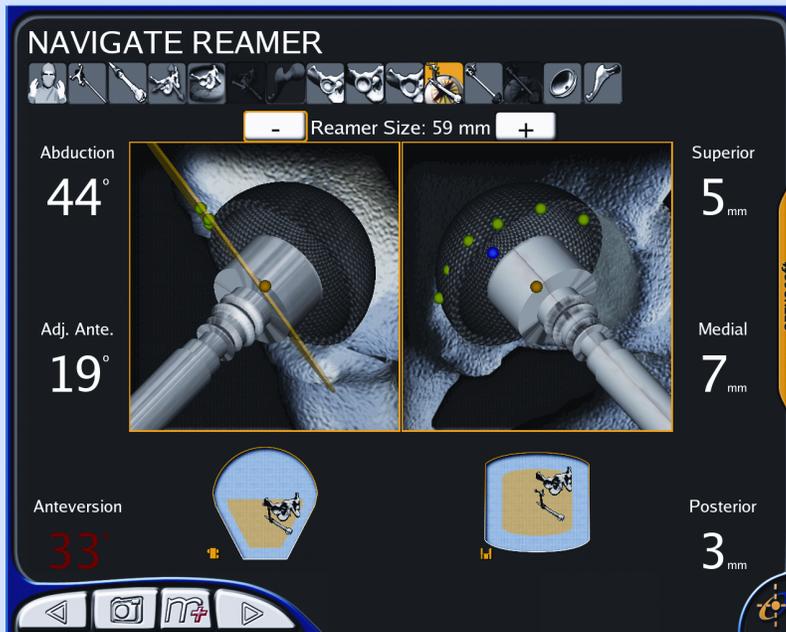


On December 11th, 2010, ORlive broadcasted a live webcast of Dr. Lock and Dr. Moskal presenting the hip replacement that was recorded last August at Hualapai Mountain Medical Center in Kingman.

The broadcast can be watched any time of day by logging on to:

www.orlive.com/zimmer/channels/zimmer

Then select the Broadcast for MIS Anterior Supine Hip featuring CAS navigation. You will need to set up a free account to view ORlive content. Or you may put Lock Moskal in the search box on the ORlive home page. *Please note that these are actual surgical images and may not be appropriate for all audiences.*



Tri-State Orthopedics
2000 Hwy. 95, Suite 200
Bullhead City, AZ
86442