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What's In a Knee?

by Michelle Mellon

Ultimate players are susceptible to spectacular knee injuries. What are all those parts? What do they do? What happens when something goes wrong? And how can you work to prevent injury to yourself? ↓



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"The bones of the knee, the thigh bone (femur) and the shin bone (tibia), meet to form a hinge joint, which is protected in front by the kneecap (patella). The joint is cushioned by articular cartilage, which covers the ends of the thigh bone and shin bone, as well as the underside of the kneecap. The cartilage cushions the joint, acting as shock absorbers between the bones.



Ligaments help stabilize the knee. The collateral ligaments run along the sides of the knee to limit sideways motion. The anterior cruciate ligament, or ACL, connects the thigh bone to the shin bone at the center of the knee, to limit rotation and forward motion of the knee joint. The posterior cruciate ligament, or PCL, limits backward motion.

These components of your knee, and the muscles of your leg, work together to manage the everyday stress placed on your knees, as you walk, run, or jump."

above text and picture taken from <http://www.thecenterfororthopedics.com/resurface.html>
This web site talks about the option of resurfacing knees

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realitynewsonline.com

This web site talks about the option of resurfacing knees suffering from osteoarthritis.

Ultimate players can really do a number on their knees. Who plays who doesn't know of someone who has had an ACL tear and/or replacement? The juking and rapid change of directions, particularly when the fields aren't in the best shape, can be a recipe for disaster. Sometimes, however, things just happen. A wayward layout, a trip, a simple misstep can disrupt or destroy the delicate balance of the workings of the knee.

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An Ultimate Story

In August 1999 my then-fiancé left one day early from a vacation with my family to play at World's in Scotland. This was his second trip to World's; he had gone a couple of years earlier in Vancouver. Two days after his arrival, he was on his way home with a torn ACL.

In the interest of walking, not hobbling, down the aisle for our wedding in October, he scheduled surgery for as soon as possible, using a doctor other than his "usual" sports surgeon. A week after the surgery infection set in, and the doctor was unreachable. A long night in the emergency room led to a horrifying 10-day stay in the hospital with multiple subsequent surgeries (by his regular surgeon) to clean out the infection, which had reached the bone. Eventually the ACL graft itself was eaten away by the infection and had to be removed. The infection also damaged the bone, which required its own graft before a new ACL graft could be put into place.

The weeks before the wedding were stressful enough with arrangements and rearrangements, a stressful project at work, and my fiancé's two-week stay at home administering an IV to himself every day. The morning of the wedding was his last IV, and he managed to stand through the ceremony without aid, although we were advised against taking a honeymoon right away so that his progress could be monitored.

In between surgeries was a lot of painful and difficult physical therapy. The intensity contributed to tendonitis in the other knee, which had been compensating through what was now 8 months of cycles of surgeries, recovery, and therapy. Now, a year-and-a-half after the original injury my husband is again undergoing intensive physical therapy to help with looseness in the injure knee, work out the stress in the supporting knee, and hopefully conclude with a non-surgical, positive outcome.

This is, of course, an extreme example of what can go wrong with sports injuries and surgeries. We did learn some important things from our ordeal:

- Acquaint your primary care provider (doctor, nurse practitioner, etc.) with ultimate and the stresses it places on your body. In the event of an injury, s/he can then prescribe the appropriate treatment (or specialist) immediately.
- If you (like my husband) have a history of injuries and have a surgeon that you feel comfortable with, **do not** switch surgeons for convenience. Although my husband's "substitute" surgeon had an impressive past history, the fact is that he didn't know my husband and we didn't know him or how his office operates, and he went out of town without leaving an emergency contact to reach when my husband's infection set in.
- Most importantly, learn how to take care of yourself. My husband's injury was caused by a mere misstep when he landed after jumping up to catch the disc. There are ways to strengthen your legs and be aware of body mechanics, however, to avoid these and other injuries in such an intense (albeit non-contact) sports environment.

Coming Soon: Tips for Injury Prevention

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