
EDITORIAL

Arthroscopy diseases or conditions

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Abstract

Arthroscopy is a surgical procedure by which the internal structure of a joint is examined for diagnosis and/or treatment using a tube-like viewing instrument called an arthroscope. Arthroscopy was popularized in the 1960s with the advent of fiberoptic technologies and is now commonplace throughout the world. Typically, it is performed by orthopedic surgeons in an outpatient setting. When performed in the outpatient setting, patients can usually return home on the same day the procedure is completed.

Introduction

The technique of arthroscopy involves inserting the arthroscope, a small tube that contains optical fibers and lenses, through tiny incisions in the skin into the joint to be examined. The arthroscope is connected to a video camera and the interior of the joint is seen on a television monitor. The size of the arthroscope varies with the size of the joint being examined. For example, the knee is examined with an arthroscope that is approximately 5 millimeters in diameter. There are arthroscopes as small as 0.5 millimeters in diameter to examine small joints such as the wrist.

If procedures are performed in addition to examining the joint with the arthroscope, this is called arthroscopic surgery. There are a number of procedures that are done in this fashion. If a procedure can be done arthroscopically instead of by traditional surgical techniques, it usually causes less tissue trauma, may result in less pain, and may promote a quicker recovery. Arthroscopy can be helpful in the diagnosis and treatment of many noninflammatory, inflammatory, and infectious types of arthritis as well as various injuries within the joint.

Noninflammatory degenerative arthritis, or osteoarthritis, can be seen using the arthroscope as frayed and irregular cartilage. A new procedure for the treatment of younger patients with an isolated injury to the cartilage covering the bone ends within a joint uses a “paste” of the patient’s own cartilage cells. The cells are harvested and grown in the laboratory and are then reimplanted at a later date in the knee with the use of an arthroscope.