



© CUPERTINO 10 | DREAMSTIME.COM

“Tuning Up” Active, Aging Knees

BY MATTHEW BOES, M.D., RALEIGH ORTHOPAEDIC CLINIC

Stiffness. Weakness. Achiness. Sound familiar? Knee pain is a common, yet frustrating part of getting older, which often keeps baby boomers from maintaining the active lifestyle they’ve come to know and desire. It is estimated that more than 60 percent of people age 45 and older experience periods of moderate knee pain at least once per year. Whether your knees ache when getting out of bed, going up the stairs, tending to the yard or during a morning mountain biking session, how can you make sure that these aches and pains don’t get the best of you?

Most approaches to knee pain focus on treating arthritis or cartilage wear. As cartilage in the knee joint wears out, this causes swelling, inflammation and pain that can be made worse with activity. An important component of treating painful knees is to lessen this inflammation by avoiding high-impact activity, applying an ice pack to the irritated area regularly and taking anti-inflammatory medicine, such as ibuprofen.

Knee pain can also come from stiffness that develops over time in tissues that surround the joints. Large muscles and tendons surround and help stabilize the knee, including the quadriceps and hamstrings in the front and back of the thigh. These muscles lose their flexibility over time and stiffen. The quadriceps are particularly prone to loss of flexibility, which can create a significant “muscle imbalance” around the knee.

Additionally, the kneecap actually sits embedded in the “tendon chain” that connects the quadriceps to the upper shinbone. Any tightening or loss of flexibility in the quadriceps leads to tension around the kneecap and creates stress across the joint between the kneecap and thighbone, also

known as the infamous “patellofemoral” joint. The patellofemoral joint is exposed to some of the highest stress of any joint in the body, as it plays a large role in basic movement, such as jumping, squatting, and going up and down stairs. Any increase in pressure across this already highly stressed joint is a recipe for significant pain in active, aging knees.

When people go to their orthopedist for knee pain, the physician will usually look to see if the person has muscle imbalance around the knee. In my practice I find this tightness and imbalance to be the main underlying contributor of knee pain in approximately 85 percent of patients.

How can you best avoid knee pain? A simple program of focused stretching for the quadriceps and hamstring muscles done three to four times per week is very effective and can often completely alleviate certain types of knee pain in just a few weeks. Remember, studies show that large muscle groups like the quadriceps are best stretched when held for 30-45 seconds rather than in short bursts. A physical therapist can be helpful in providing you with a solid home stretching program.

Simple lifestyle modifications, including maintaining a healthy weight, engaging in exercises that are easy on the knees, such as swimming or cycling; and incorporating a stretching into your weekly routine can help keep your knees in check, and “tuned up” over time.

Matthew Boes, MD, is a board-certified, fellowship-trained orthopaedic surgeon specializing in sports medicine and shoulder and knee replacement. A member of Raleigh Orthopaedic Clinic, he serves as Team Physician for North Carolina State University’s football and baseball teams. For more information visit www.matthewboesmd.com.

Trouble Sleeping?



If you are between the ages of 18 and 75, and have both major depressive disorder and trouble falling or staying asleep at night, you may be eligible to participate in a research study at the Duke Sleep Disorders Center. Eligible participants will receive an FDA-approved medication for depression and learn new strategies to improve sleep.

For more information, call 919-613-3695.



Pro00005187

Are you feeling depressed? Are your medications not working?

Duke University Medical Center is conducting a research study investigating treatment outcomes in adults with late-life depression.

Participants will receive an acute course of electroconvulsive therapy (ECT). Those who respond to ECT will be randomly assigned to one of two groups for a six-month follow-up phase: a group that receives medication alone or a group that receives medication plus an investigational course of maintenance ECT.

To be eligible, you must meet the following requirements:

- Be 60 years of age or older
- Have current symptoms of depression such as sadness, trouble concentrating, and low energy

Please call 919-681-0603 for more information.

Duke University Medical Center
Sarah H. Lisanby, M.D.
www.dukehealth.org



DUKE UNIVERSITY MEDICAL CENTER
Department of Psychiatry and Behavioral Sciences

Pro00027625