



For best results,  
get the injury  
checked out as  
soon as possible

# Tomorrow's world

THERE HAVE BEEN MANY RECENT ADVANCES IN KNEE SURGERY AS ONE TOP SURGEON EXPLAINS

**T**he knee is the most commonly injured joint in football. Changing direction quickly (cutting) or direct impacts can lead to significant injury resulting in many months out of the game. Prompt, specialist diagnosis and treatment will minimise your recovery time. Here, consultant orthopaedic surgeon Mr Hersh Deo discusses some of the cutting-edge treatments he performs to keep you playing.

## Anatomic ACL reconstruction

'Conventional ACL reconstruction has been shown to have a poorer functional outcome and a higher revision rate compared to anatomic reconstruction,' says Mr Deo. 'I carefully place my ACL graft using keyhole surgery at the anatomic landmarks of the original ACL. It is normally done as a day case procedure with no bracing afterwards.'

## Meniscal repair

'Menisci (shock absorbers) are commonly torn during twisting injuries. They are vital to knee function. The conventional treatment is to remove part (or all) of the meniscus through keyhole



surgery. It is possible for me to repair the meniscus with sutures using keyhole surgery thus prolonging the long term health and function of your knee.'

## Articular cartilage repair / transplant

'Articular cartilage lines the bone ends, providing a smooth, gliding surface within your knee. Once damaged (usually by a twisting injury) it has no ability to repair itself. If untreated, this will lead to osteoarthritis. I am able to repair the cartilage defect with keyhole surgery using the patient's own stem cells contained within blood. For larger defects I am able to transplant



a plug of the patient's bone and cartilage into the defect.'

## Patella stabilisation

'Patella (kneecap) dislocation, left untreated, can lead to recurrent instability and, eventually, osteoarthritis. Conventionally, the patella is stabilised through a large incision moving the entire tendon insertion to a new position, but this never really addresses the underlying problem and long term results are poor.

'The main cause of patella instability is medial patella-femoral ligament rupture. I reconstruct this anatomically, restoring movement and stability.'

## KNEE SPECIALIST



Mr Hersh Deo  
MBBS, MRCS, MSc.  
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is a London-trained consultant orthopaedic surgeon based in East Anglia. Having completed fellowships in arthroscopy and joint replacement in London and Adelaide, his special interest is sports injuries of the knee.

## FOR MORE INFORMATION

Visit

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