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Total Knee Replacement

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January 1990 through October 2003

3813 Citations

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Journal Article:

Example:

Alemparte J, Cabezas A, Azocar O, Hernandez R, Acevedo M. Mid-term results of an AGC total knee arthroplasty system survival and function analysis: 2- to 8-year follow-up results. *J Arthroplasty*. 2003 Jun;18(4):420-5. Available from: [PubMed: PMID 12820082](#)

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What Factors Explain Disparities in the Utilization of Total Knee Replacement in Different Populations

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Monograph:

Example:

Engh GA, Rorabeck CH, editors. Revision total knee arthroplasty. Baltimore: Williams & Wilkins; c1997. 485 p.

Order, with separating punctuation:

Author 1, Author 2, Author 3. Monograph Title: Subtitle. Place of Publication: Publisher; Date of Publication. Total Number of Pages.

Monograph Contribution:

Example:

Greene B. Rehabilitation after total knee replacement. In: Greenfield BH, editor. Rehabilitation of the knee: a problem-solving approach. Philadelphia: F.A. Davis; 1993. p. 410-31.

Order, with separating punctuation:

Contribution Author 1, Contribution Author 2, Contribution Author 3. Contribution Title. Connective Phrase: Author 1, Author 2, Author 3. Monograph Title: Subtitle. Place of Publication: Publisher; Date of Publication. Pages.

Dissertation:

Example:

Spady BL. The validity of EuroQoL scores of patients with hip or knee replacement [dissertation]. Alberta (Canada): University of Alberta; 2000. 173 p.

Order, with separating punctuation:

Author. Dissertation Title: Subtitle [Content Designator]. Place of Publication: Publisher; Date of Publication. Total Number of Pages.

Conference Paper:

Example:

Johnson T, Ramani K. Macro polyethylene/titanium alloy composite for use in a constrained knee prosthesis. In: Nicholas T, editor. Advanced materials - development, characterization processing, and mechanical behavior. Proceedings, ASME International Mechanical Engineering Congress and Exposition; 1996 Nov 17-22; Atlanta, GA. New York: ASME Press; 1996 Dec. p. 165-6.

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* For details of the formats used for references, see the following publications:

Patrias, Karen. *National Library of Medicine recommended formats for bibliographic citation*. Bethesda (MD): The

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Introduction

Total Knee Replacement

Total knee replacement (TKR) has shown increasing success in relieving knee pain and improving joint function for patients suffering from knee problems due to injury, degenerative disease, and inflammation. Each year approximately 300,000 TKR surgeries are performed in the United States for end-stage arthritis of the knee joint. As the number of TKR surgeries performed each year increases and the indications for TKR extend to younger patients, a review of available scientific information is necessary to enhance clinical decision-making and stimulate further research.

First used in the late 1950s, early TKR implants poorly mimicked the natural motion of the knee and resulted in high failure and complication rates. Advances in TKR technology within the past 10 years have enhanced the design and fit of knee implants, resulting in improved short-term and long-term outcomes.

Despite the increased success of TKR, questions remain concerning which materials and implant designs are most effective for specific patient populations and which surgical approach is optimal for a successful outcome. Physical, social, and psychological issues may influence the success of TKR, and understanding patient differences could facilitate the decision-making process before, during, and after surgery, thereby achieving the greatest benefit from TKR. Particular attention also must be given to the treatment and timing options related to the revision of failed TKR surgery.

To address these questions, the National Institutes of Health is sponsoring a Consensus Development Conference, titled "Total Knee Replacement", to be held December 8-10, 2003 at the National Institutes of Health in Bethesda, Maryland. The primary sponsors of this conference are the National Institute of Arthritis and Musculoskeletal and Skin Diseases and the NIH Office of Medical Applications of Research. Additional sponsors include the National Institute of Child Health and Human Development (NICHD), U.S. Food and Drug Administration (FDA), National Institute of Standards and technology (NIST), the NIH Office of Research on Women's Health (ORWH), the National Library of Medicine (NLM), NIH and the Agency for Healthcare Research and Quality (AHRQ). The purposes of the conference are to assess the current state of the science regarding primary and revision total knee replacements, and to identify research needs and opportunities.

In support of this Conference, a search was conducted of the vast literature available on this topic, primarily as it pertains to humans. This bibliography contains selected citations to journal articles, books, conference proceedings, and theses from January 1990 to October 2003. References appear in 5 broad categories that parallel topics presented at the conference, with many of the topics further broken down. Citations may appear in only one category.

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Current Indications and Outcomes for Primary Total Knee Replacement

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Design-specific Factors that Affect Outcomes

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Important Perioperative Interventions That Influence Outcome

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-Thromboembolic Prevention

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