

# Department for Orthopedics and Trauma Surgery

Conservative and surgical treatment options



### Competent care – modern and patient-oriented

The department has three sections, which together represent the orthopedic trauma surgery treatment portfolio. The team, consisting of ten specialists and two assistant physicians, provides treatment for more than 2,400 inpatients and 3,000 outpatients per year.

Since 2013, the department has been certified as a maximum care arthroplasty center. The certificate is verified for up-to-dateness and renewed annually within the framework of external audits. This ensures that the professional associations' quality requirements are met.

We are authorized by the Association of Statutory Health Insurance Physicians (Kassenärztliche Vereinigung, KV) to perform infiltration treatments under X-ray fluoroscopy of the spine and joint punctures.

### Range of treatment

- » Arthroplasty of the hip, knee and shoulder joints (primary and replacement procedures)
- » Conservative and surgical treatment of spinal disor ders, including fluoroscopy-assisted infiltrations and facet joint obliterations
- » Surgical treatment of unstable spine and vertebral body fractures
- » Endoscopic surgery of knee, shoulder, elbow, hip and ankle joints
- » Trauma treatment of bone fractures and joint injuries
- » Conservative and surgical treatment of deformities of the musculoskeletal system
- » Conservative and surgical treatment of sports injuries
- » Sports medicine care and counseling
- » Conservative and surgical treatment of foot deformities
- » Osteoporosis treatment, bone density measurement, center of excellence for osteology
- » Pain therapy for chronic pain patients
- » Treatment of occupational injuries



### Hip, knee and shoulder joint disease

Joint of hip, knee and shoulder are the largest joints of the human body. The wear and tear of a joint is called osteoarthritis. In medical terminology, wear and tear of the hip joint is called "coxarthrosis" and wear of the knee joint is called "gonarthrosis". Arthrosis generally first becomes noticeable through pain when walking. In this context, the so-called "warm-up pain" is typical. With increasing wear of cartilage and joints, pain at rest and at night may also occur.

If the symptoms can no longer be controlled by conservative measures and the quality of life suffers significantly, the time has come that joint replacement surgery should be discussed.

Such a decision is always a case-by-case decision that follows from a detailed and individual consultation between the attending physician and the patient.

The department has three modern operating rooms with facilities for intraoperative fluoroscopy and navigation. Each year, more than 450 hip and approximately 250 knee arthroplasty procedures are performed in Landstuhl.

We use only high-quality implants from renowned manufacturers that meet the individual needs of each patient. In all suitable cases, minimally invasive procedures are used as a matter of priority.

In cases of advanced arthrosis of the shoulder joint (omarthrosis) or comminuted fractures of the humeral head, a fitting shoulder joint arthroplasty can be performed and thus the mobility of the affected shoulder joint can be restored or a more pain-free movement can be gained.

### Foot surgery

Treatment of foot deformities includes, in particular, surgical correction of bunions (hallux valgus), stiff big toes (hallux rigidus), painful metatarsal head (metatarsalgia), and hammer toes.

Complex foot deformities, Achilles tendon ruptures and disorders as well as spur formation in the foot are also part of the department's surgical repertoire.

## Arthroscopic surgery of the large joints

Arthroscopic surgery (arthroscopy of the joints) plays a major role, primarily in cases of joint degeneration such as cartilage damage, arthrosis, meniscus damage or ligament instability. Arthroscopic replacement surgery, e.g. of the anterior cruciate ligament of the knee joint, is also a routine procedure.

In the shoulder joint, the modern technique of arthroscopy allows a whole range of reconstructive interventions, from the removal of calcified tendonitis to tendon reconstruction and shoulder stabilization. Likewise, arthroscopic shoulder decompressions are regularly performed to restore pain-free mobility. This applies similarly to procedures on the upper ankle and elbow.



Mr. Stylianos Toumasis, senior physician in charge, with a patient

If signs of wear of the joints are accompanied by deformities, i.e. malpositions such as knock-knees, bow-legs, foot and toe malpositions, we offer corrective operations on the affected positions - on the hip, knee or even the feet. If such operations are performed in time, joint replacement surgery can be delayed or even made unnecessary.

### Traumatology

For the treatment of acute injuries suffered at home or during sports, the department has modern treatment options, such as implants for bone fractures, treatment options for ligament injuries, e.g. of the ankle or knee joint. We can also treat vertebral body fractures with various conservative or surgical procedures. We provide care for our patients 7 days a week, 24 hours a day.

# Diseases of the spine and intervertebral discs

Each year, we treat more than 500 patients with back and intervertebral disc problems, both conservatively and surgically.

In the case of acute complaints, therapy can be started by the targeted intravenous use of painkillers (infusions) and by anti-inflammatory agents and, if necessary, more potent drugs. After the acute pain phase has subsided, physiotherapy and balneo-physical measures usually lead to a further reduction in discomfort and a transition to normal resilience.

In the case of existing herniated discs, it is possible to perform an epidural catheter treatment (so-called pain catheter) or a single-shot epidural treatment (single injection into the spinal canal) in the area of the lumbar spine. The indication for this type of pain therapy is made within the framework of our consultation hours.

In addition, it is possible to perform targeted infiltration of pain-relieving drugs, also under control by means of X-ray fluoroscopy. Sometimes, when these measures are not sufficient, epidural catheter treatment can also bring about a lasting reduction in pain or even freedom from pain.

Only after all conservative treatment measures have been exhausted will surgical treatment of the cause come up for discussion if pain persists. Severe paralysis, in particular in the area of the sphincters of the bladder and rectum, must be treated surgically without delay.

For spinal instabilities where conservative therapy fails, fusion surgery can be offered in a variety of procedures.



Dr. med. Sascha Schläger, chief physician, examining a patient

# **Osteology / Osteoporosis / Kyphoplasty**

In medicine, osteology is the interface between orthopedics and endocrinology and deals with the physiological structure of bones and the processes of bone metabolism and its diseases. The diagnosis and therapy of bone tumors is also partly covered by this field.

Our focus is on osteoporosis, which has become a widespread disease. Fractures of the upper arm near the shoulder, of the wrist, of the femoral neck and of vertebral bodies of the thoracic and lumbar spine are becoming more frequent as the population ages. Early diagnosis of this economically very important, because expensive, disease is therefore of great importance. In addition to a few clear indications from one's own and family history, laboratory tests and lifestyle habits, it is above all the bone density measurement according to the DXA method (Dual Energy X-ray Absorptiometry), as it has been carried out in our clinic for more than 10 years, that points to this disease.

If fractures have occurred, the trauma surgery treatment measures are taken depending on the affected body region. In the case of vertebral fractures, balloon kyphoplasty, and more recently radiofrequency kyphoplasty, has been established in our clinic for many years as a safe and rapidly effective minimally invasive operation.

### Orthopedic department Regular informative evening events

The department of orthopedics and trauma surgery regularly offers informative events for interested patients on the topics of spine and intervertebral disc, shoulder joint diseases, hip and knee joint diseases, hip and knee replacements, as well as foot and osteoporosis diseases. We will post the dates of the events on our website.

For more information, visit the hospital's website at www.nardiniklinikum.de/Veranstaltungen or call us at +49 6371 84-2701.

### Contact

Chief physician Dr. med. Sascha Schläger

### Section head of arthroplasty

St. Toumasis, senior physician in charge and A. Pfeifer, senior physician in charge

Other persons you may contact: Dr. med. M. Merai, senior physician R. Dawood, senior physician

#### Section head of traumatology

V. Balzer, senior physician in charge and Dr. med. D. Wrede, senior physician in charge

### Section head spinal diseases

Dr. med. S. Schläger, chief physician and Dr. med. D. Wrede, senior physician in charge

Phone	+49 6371 84-2701 and +49 6371 84-3713
Fax	+49 6371 84-2710
Email	orthopaedie-landstuhl@nardiniklinikum.de

Nardini Klinikum · St. Johannis Nardinistraße 30 · 66849 Landstuhl Phone +49 6371 84-0 www.nardiniklinikum.de