

Case-Base Discussion – 13th March 2024 (Ref 355)

Case presented by Osteopath: Claire Short

All about the knee . . .

The first patient discussed day was a 53-year-old man who sustained an injury while playing softball in December 2023. He had sudden pain in the superior calf and posterior knee, aggravated by end of range flexion and extension. He went to A&E and the X-ray report queried an avulsion fracture of the medial tibial spine. He was given a splint and some exercises and was advised to have an MRI which confirmed a complete proximal medial head of gastrocnemius tear with adjacent myotendinous junction injury. The advice from the orthopaedic consultant was non-surgical management, and six months post-injury he was skiing, and hiking in the mountains.

The case led to a discussion of the appropriateness of presenting the patient with the X-ray report with no explanation, and the difference between full thickness tear, i.e. when a tendon remains largely intact but has a longitudinal tear though its complete width, and a complete rupture, when the tendon has completely separated, although it was agreed that the terminology does seem to vary according to different sources.

The second case discussed today was of a patient with a history remarkably similar to Steven's! Following a total knee replacement, rehabilitation had been progressing well until an untimely illness set him back. By the time he was able to continue with rehabilitation, the knee had other plans, and he was left with severe loss of flexion. MUA was carried out, and he has since been able to resume exercising such as cycling with no pain; however, knee flexion is still reduced, with full squatting still not possible.

The meeting concluded with a discussion of managing soft tissue post-surgery, and the extent to which manual therapists can promote healing and movement through work on the scar tissue. From Claire's experience, techniques for breaking down scar tissue can achieve excellent results – a topic to be discussed further in an APM meeting in June.

Linking this discussion with the OPS Themes

A – Communication and patient partnership

A2 You must work in partnership with patients, adapting your communication approach to take into account their particular needs and supporting patients in expressing to you what is important to them.

A3 You must give patients the information they want or need to know in a way they can understand.

A5 You must support patients in caring for themselves to improve and maintain their own health and wellbeing.

B - Knowledge, skills and performance

B1 You must have and be able to apply sufficient and appropriate knowledge and skills to support your work as an osteopath.

B2 You must recognise and work within the limits of your training and competence.

B3 You must keep your professional knowledge and skills up to date.

B4 You must be able to analyse and reflect upon information related to your practice in order to enhance patient care.

C - Safety and quality in practice

C1 You must be able to conduct an osteopathic patient evaluation and deliver safe, competent and appropriate osteopathic care to your patients.

Linking this discussion with the Chiropractic Code

Principle C – Provide a good standard of clinical care and practice

C4 Use the results of your clinical assessment of the patient to arrive at a working diagnosis or rationale for care which you must document. You must keep the patient fully informed.

C6 Select and apply appropriate evidence-based care which meets the preferences of the patient at that time.

Principle F – Communicate properly and effectively with patients, colleagues and other healthcare professionals

F4 Take account of patient communication needs and preferences.

Principle G – Maintain, develop and work within your professional knowledge and skills

G1 Keep your knowledge and skills up to date, taking part in relevant and regular learning and professional development activities that aim to maintain and develop your competence and improve your performance and the quality of your work.

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