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Meniscal Tear

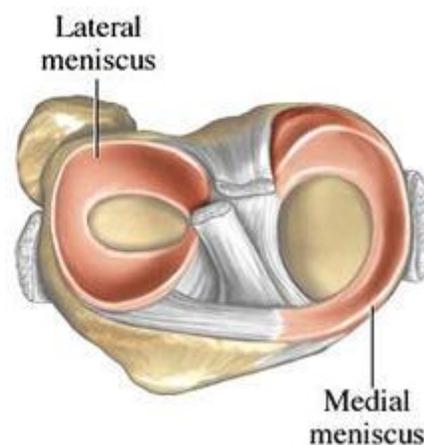
What is a meniscal tear?

The meniscus is a piece of tough, smooth, rubbery tissue that lines and cushions the knee joint. There is a meniscus on the inner side of your knee (the medial meniscus) and a meniscus on the outer side (the lateral meniscus). They attach to the top of the shin bone (tibia), make contact with the thigh bone (femur), and act as shock absorbers during weight-bearing activities.

Meniscus
(front view)



Top view



How does it occur?

A meniscal tear can occur when the knee is forcefully twisted or occasionally with minimal or no trauma, such as when you are squatting.

What are the symptoms?

You may have pain, swelling, or be unable to fully bend or straighten your leg. Your knee may lock or get stuck in one place. You may hear a snap or pop at the time of the injury.

A chronic (old) meniscal tear may give you pain on and off during activities, with or without swelling. Your knee may occasionally lock and you may have stiffness in the knee.

How is it diagnosed?

The history and physical exam may raise concern about the meniscus. Your doctor may order x-rays to see if there are injuries to the bones in your knee, but a meniscal tear will not show up on an x-ray. An MRI (magnetic resonance imaging) is sometimes useful in diagnosing a meniscal tear.

How is it treated?

Treatment may include:

- Icing your knee for 20 to 30 minutes every 3 to 4 hours for 2 to 3 days or until the pain and swelling go away
- elevating your knee by placing a pillow underneath it
- wrapping an elastic bandage around your knee to keep the swelling from getting worse
- taking an anti-inflammatory medication or other drugs prescribed by your doctor
- Surgery may be needed to repair or remove large torn pieces of meniscus.

While you are recovering from your injury, you will need to change your sport or activity to one that does not make your condition worse. For example, you may need to swim instead of run.