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Charging Into the Golden Years

This is the final installment of a 12-part series: This year we're focusing on the phenomenal progress that the medical community has made in the 30 years of Federal Practitioner's existence. Each month we'll feature an editorial written by one of our Editorial Advisory Association members, reminding us how much has changed in their particular medical field over the past 30 years. This month's focus is orthopedic surgery.

–James V. Felicetta, MD

hirty years ago, my grandparents were still alive. They lived in a small house in central Illinois with a front porch and a swing. As they aged, they spent more time on the front porch swing and less time being physically active. At the turn of the century, when my grandmother was born (yes, 1900!), the expectation was that people would simply grow old and become less active. After all, this seemed to be the experience for every single past generation in history.

Typically, activity limitations in my grandparents' era began in childhood. Many congenital disorders went untreated, along with corresponding disabilities. Injuries from youth sports and adult work, including fractures, back problems, and ligament and cartilage injuries slowed down many of their peers. As folks aged into their 50s and 60s, back and lower extremity arthritis further reduced participation in strenuous activities. By retirement, a good part of the population was in their rocking chairs or on their porch swings due to pain and disability.

Fast-forward 30 years: The front porch swing is gone, and our seniors are moving into their golden years unlike any other previous generation. We see 85-year-olds jogging 5 miles a day, riding bicycles across the country, kayaking, playing racquetball, and charging headlong into their senior years without much evidence of slowing down.

Certainly, nutrition, public health measures, and overall medical care account for some of this amazing change in activity level. I would, however, make the rather immodest and extremity deformities, as well as treating serious childhood injuries, has allowed many of these patients to assume full activity without noticeable restrictions.

At the other end of the age spectrum, seniors who become progressively bent over as they age may have spinal stenosis. The posterior joints and bones of the spine hypertrophy, forcing the patient into flexion to allow space for passage of the spinal nerves. Today, orthopedic spine surgeons correct many of the conditions leading to severe stenosis, relieving nerve pressure and improving postural deformities.

In the upper extremity, patients

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assertion that the success of orthopedic surgery has played a large role in resetting the expectations for our seniors' extremely active twilight years.

Historically, orthopedic surgery began with work in children. In Charles Dickens' day, the term *cripple* was often used to describe a young person who had one of many congenital orthopedic conditions; fortunately, this term has been erased from our contemporary vocabulary. The success of pediatric orthopedics in correcting significant spine with unrepairable rotator cuff injuries of the shoulder can now have a *reverse shoulder* operation, which seems to allow much improved elevation of the arm, even without some of the important muscles usually needed for this activity. Hand surgeons help treat arthritis and nerve compression conditions of the hand and wrist, allowing continued upper-extremity dexterity into the later years of life. There is even a device to replace worn out elbows!

In the lower extremity, hip and

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knee replacements are some of the most common surgeries performed by orthopedic surgeons. In 2013, over 600,000 knee replacement operations will be performed in the U.S. to help our seniors off the porch swing and into their favorite activities.1 The National Institutes of Health issued the following statement regarding total knee replacement: "There appears to be rapid and substantial improvement in the patient's pain, functional status, and overall health-related quality of life in about 90% of patients; about 85% of patients are satisfied with the results of surgery."2

We have also seen remarkable advances in the surgical treatment of bone and joint conditions over the past 30 years. Dedicated orthopedic surgeons, outstanding academic medical centers, and a large concentration of high-quality orthopedic companies have made the U.S. the source of a huge number of the worldwide innovations in orthopedic surgery. With these innovations, our attitude toward activity and aging has changed dramatically for the better.

My hope for the next 30 years is that orthopedic innovation in the U.S. can continue, especially as health care financing is restructured. After all, someday I, too, may reach my golden years, and I sure would like to stay active. Actually, since AARP is already sending me friendly letters, that time may not be too far off. ●

Author disclosure

The author reports no actual or potential conflicts of interest with regard to this article.

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