

## Do I need an MRI of my knee?

In most patients over the age of 50, an MRI of the knee is unnecessary. The best radiological assessment tool is a complete weight bearing set of x-rays. This allows doctors to assess arthritis, fractures, and alignment.

Lying down for x-rays or MRI's does not allow an accurate assessment of arthritis which is common as we age.

Numerous studies show that meniscus tears are a normal process of aging and approximately 50% of patients over 50 have tears of the meniscus, many of which are asymptomatic. The rate of meniscus tears in patients with arthritis nears 100%.

Arthroscopic surgery for symptomatic meniscus tears in younger patients without arthritis is successful. However, when an arthritic knee is found to have a meniscus tear the results are unpredictable. Some patients have some improvement, some patients have no improvement and occasionally the pain and symptoms can be worse following arthroscopic surgery in arthritis knees.

This is why it is important to try conservative treatments first such as activity modification, weight loss (if indicated), a home exercise program or PT, oral anti-inflammatory, or a cortisone injection.

"Does MRI Knee in Those over 50 Years with Knee Pain in Osteoarthritis Alter Management? A Retrospective Review" Murphy et al, J Knee Surg 2023

'On MRI, the most prevalent finding was tearing of the meniscus, seen in 47%'

'[MRI's] should only be ordered in certain cases, and a radiograph should always be performed first.'

"Use of Knee MRI by Primary Care Physicians in Patients Aged 40 Years and Older" Petron et al., Sports Health 2010

Conclusion: Primary care providers may be overusing knee MRI's and underusing flexion weightbearing posteroanterior radiographs in patients older than 40 years with knee pain

You can learn more by reading my **book** *'The Knee Book – A Guide to the Aging Knee'* or visit my **YouTube** Channel @DrAdamRosen