



Higher Preoperative Knee Extensor Strength Could Be Beneficial In Reducing Total Blood Loss In Total Knee Arthroplasty

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Faculty Disclosure Information

- Nothing to disclosure...



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Introduction

- ❖ **Intraoperative blood loss is one of the major risks of surgical procedure**
 - Critical to accelerating patients' post operative recovery, post operative function.
- ❖ **Previous study suggests tourniquet application, intraoperative tranexamic acid(TXA) to reduce intraoperative blood loss**
 - Few studies report whether preoperative lower-limb muscle strength condition affect intraoperative blood loss in TKA → **Controversial**

Aim of study

❖ To assess the effect of preoperative lower-limb extensor strength on total blood loss, preoperative and POD1 knee pain and function

Material and Method

❖ Retrospective study

- Involved 115 patients scheduled for TKA from February 2022 to March 2023
- Based on the presence of sarcopenia, all patients were divided into normal(n=87) and sarcopenia group(n=28)

❖ Preoperative isokinetic muscle strength(IMS) by Biodex

❖ **Total blood loss** =
$$\frac{EBV (Hct_0 - Hct_f)}{Hct_{AV}}$$

Hct₀ = hematocrit before surgery; Hct_f = hematocrit after surgery

Hct_{AV} = (hematocrit before surgery + hematocrit after surgery) / 2

Material and Method

❖ Sarcopenia(defined by Asian Working group for Sarcopenia(AWGS))

(1) Muscle strength(Hand grip strength)

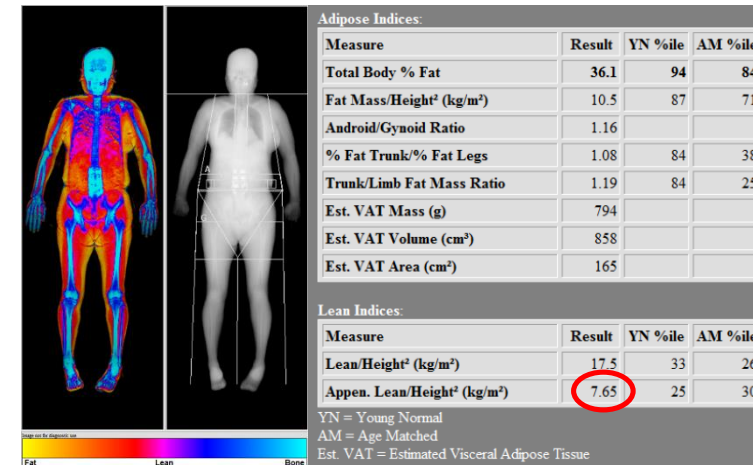


Male <28kg
Female <18kg

(2) Physical performance test

- 6-meter walk <1.0m/s
- OR 5-time chair stand test >12sec
- OR Short Physical Performance battery <9

(3) Muscle mass(Whole body dexe)



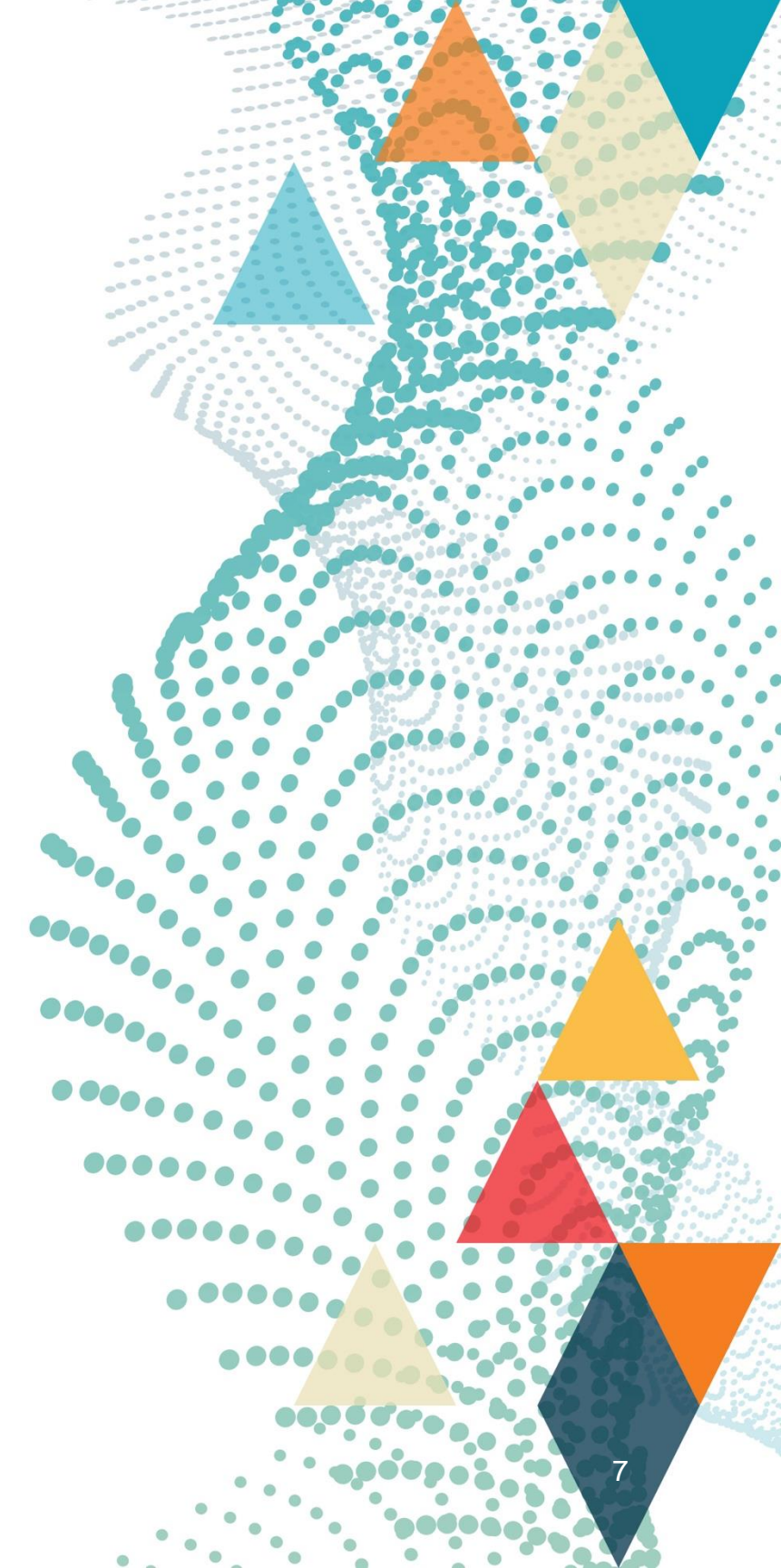
Male < 7.0 kg/m²
Female < 5.4 kg/m²

Sarcopenia

Low ASM + low muscle strength
OR Low physical performance

Results

- ❖ **TBL** : Sarcopenia group $>$ Normal group
- ❖ **Postoperative ROM** : Sarcopenia group $<$ Normal group
- ❖ **Postoperative pain** : Sarcopenia group $>$ Normal group
- ❖ **Physical performance** : Sarcopenia group $<$ Normal group



Results

Table 1. Basic characteristics of TKA patients

	No sarcopenia Group (n=87)	Sarcopenia Group (n=28)	P
Female/Male, n	82/5	26/2	-
Age, Mean (SD)- years	70.9 (5.5)	71.4 (6.0)	<i>n.s</i>
BMI, Mean (SD)-kg/m ²	26.5 (2.8)	23.2 (3.1)	0.005
ASA classification, II/III	73/14	24/4	<i>n.s</i>
LOS, Mean (SD)-Day	6.0 (1.4)	6.7 (1.0)	<i>n.s</i>
Extensor Torque at 60 degree (N.m)	71.4(12.4)	51.8(15.4)	0.000
Grip strength (kg)	15.8 (7.8)	12.2 (4.3)	0.000
Abnormal physical performance test (n)	57 (65.5%)	28 (100%)	0.000
Whole body Dexa (APM, kg/m ²)	5.8 (3.4)	4.9(5.2)	0.000

TKA: total knee arthroplasty, BMI: body mass index; ASA: American Society of Anesthesiologists; LOS: length of hospital stay.

Data were analyzed using the *Mann-Whitney U* test, unless otherwise noted.

Results

Table 2. Comparison of measurements between the sarcopenia and normal groups after TKA.

	No sarcopenia Group (n=87)	Sarcopenia Group (n=28)	P
TBL, Mean (SD)-ml	534.5 (105.0)	635.9 (142.4)	0.000
Homologous Transfusion, n (%)	4 (4.6)	2 (7.1)	0.179
POD7 Values			
Hct, Mean (SD)-%	36.7 (3.8)	34.5 (3.5)	0.007
Hb, Mean (SD)-g/L	119.3 (5.3)	117.0 (5.1)	0.046
Hct Loss, Mean (SD)-%	5.5 (1.2)	6.5 (1.4)	0.000
Hb Loss, Mean (SD)-g/L	17.1 (8.5)	17.6 (8.4)	0.780
POD7 Pain and Function			
VAS, Mean (SD)	3.9 (0.7)	4.3 (0.6)	0.007
Knee ROM, Mean (SD)-degree	95.8 (5.4)	85.8 (3.8)	0.000

TKA: total knee arthroplasty; TBL: total blood loss; POD7: postoperative day 7; Hct: Hematocrit; Hb: Hemoglobin; VAS: visual analog scale; ROM: active range of motion.

Summary

- ❖ **Patients extensor strength was found significantly lower in sarcopenia group.**
- ❖ **Compared to normal group, the sarcopenia group had lower TBL, greater postoperative ROM, less postoperative pain, better physical performance results.**

Conclusion

- ❖ **Patients with sarcopenia were found higher total blood loss and lower functional outcomes in early period after TKA.**
- ❖ **In preoperative preparation for TKA, knee extensor muscle strength is important.**

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