



Florida Health Care News



Florida's largest health care information publication

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ORTHOPEDIC SURGERY

Hip replacement of champions.

Thanks to the **M2a-Magnum**, patients needing hip replacements, like former Olympic gymnastics winner **Mary Lou Retton**, no longer have to give up their active lifestyles.

Harold Spier was losing his ability to walk.

"I play a lot of golf," says Harold, "and it had gotten to the stage where I was having real difficulty with my game. Then when we went on vacation to Machu Picchu [Peru], climbing all the irregular steps was very problematic for me.

"Once we got back home, the pain continued to progress until it became so intense I was having real trouble sleeping at night and I could barely walk; I was developing a limp. It made even everyday living difficult."

But in November 2006, the 68-year-old retired systems analyst attended a neighborhood party that had life-changing consequences.

"I was speaking with Linda Donadei, a medical records specialist, about my limp," remembers Harold. "She told me she worked for an orthopedist by the name of Dr. Davis and recommended that I have him take a look to see if the problem was in my hip."

Mark J. Davis, MD, FAAOS, is a board-certified orthopedic surgeon with extensive, well-recognized, and prestigious additional fellowship training in knee and hip replacement from Anderson Clinic in Arlington, Virginia. He frequently travels to various cities as a surgeon trainer for multiple surgical techniques. Dr. Davis was also recognized by *Gulf Shore Life Magazine* in 2005, 2006 and 2007 as one of the top orthopedic surgeons in southwest Florida.

"I scheduled an appointment with Dr. Davis for November 28," recalls Harold.

As he does with all his patients, Dr. Davis began Harold's treatment with a very thorough examination and an in-depth discussion about his daily activities and desired outcome.

"Age, activities of daily living, injury or illness (see **Hip replacement of champions**, page 4)



The M2a-Magnum is the hip replacement system chosen for former Olympic gymnastics champion Mary Lou Retton.

SOURCE: BIOMET

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REHABILITATION HOSPITAL



Intense attention for recovery

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COLON AND RECTAL SURGERY



Get treatment for colorectal concerns

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Hip replacement of champions

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and osteoarthritis all can take their toll on the cartilage, which serves as a 'shock absorber' in the weight-bearing joints in our hips and knees," offers Dr. Davis. "The normally smooth cartilage becomes pitted and rough, impeding the gliding motion of a normally functioning joint and causing pain that can radiate to other parts of the body. Sometimes, pieces of cartilage will break off and add to the pain in the joint. In extreme cases, the cartilage wears away completely, and the bones that meet inside the joint grate on each other, escalating the pain."

If arthritis and deteriorating cartilage are detected early, many patients can be helped by medication, joint protection and physical therapy to ease pain and restore motion.

"X-rays were taken that showed my left hip was perfectly fine but I had arthritis in my right hip," recounts Harold. "Dr. Davis didn't jump into surgery, which I appreciated. Instead, he recommended that I try a steroid injection that would act in a diagnostic capacity and could possibly provide me with up to eighteen months of relief."

For Harold, the pain relief from his steroid injection lasted only a week.

"Dr. Davis also told me that I would know when it was time for surgery," says Harold. "I reached that point a couple of months later."

"Conservative measures can sometimes forestall or eliminate the need for joint replacement," states Dr. Davis. "When these are no

FHCN PHOTO BY NERISSA JOHNSON



Harold attributes his rapid recovery and quick return to the golf course to good preparation, follow-up therapy, and Dr. Davis' great technique.

longer sufficient to relieve pain and restore function, hip replacement is often the best available alternative for restoring quality of life. Clearly, Harold had reached that level."

Active patients

Dr. Davis has extensive training in total joint replacement for both younger and more mature patients and because of Harold's busy lifestyle and his desire to remain physically active, Dr. Davis recommended a hip replacement implant called the M2a-Magnum that would allow him greater stability and range of motion than other implants provide.

According to the doctor, although the plastic liner traditionally used in hip replacements is very durable, the amount of stress very active people can place on it sometimes leads to premature wear.

"The M2a-Magnum hip implant is metal on metal," he describes, "and is designed to provide long-term resistance to wear. Additionally, it more closely replicates the size of a patient's natural anatomy. By making the ball of the joint that fits into the socket bigger to match the patient, it reduces dislocation problems and slows down the wear rate, both important factors for younger, active patients."

Manufactured by Biomet, the M2a-Magnum is the same hip



Mark J. Davis, MD, is board certified by the American Board of Orthopaedic Surgery and fellowship trained in joint replacement through Anderson Orthopaedic Research Institute, Arlington, VA. He completed his undergraduate studies at Iowa Wesleyan College, Mt. Pleasant, and received his medical degree from University of Iowa College of Medicine, Iowa City. Dr. Davis completed his orthopaedic residency at West Virginia University/Ruby Memorial Hospital, Morgantown. He is a fellow of the American Academy of Orthopaedic Surgeons and a member of the American Medical Association, Florida Medical Association, and Charlotte County Medical Society. Dr. Davis has lectured extensively in his areas of expertise. He enjoys photography, motorcycle riding, and traveling.

replacement system used for 1984 Olympic gold-medal winner Mary Lou Retton. Suffering from dysplasia, an abnormal formation of the hip joint, Mary Lou chose to have hip replacement surgery while still in her 30s and was so pleased with her results that she became a spokesperson for Biomet. In fact, Mary Lou's surgeon completed the same fellowship as Dr. Davis, and he recently attended a meeting where Dr. Davis was instructing him on the Oxford knee.

While Dr. Davis always takes a conservative approach when considering surgery options, if the patient's condition gets to the point where surgery is required, he uses the most minimally-invasive techniques and the latest products to match the patient to the proper implant.

Once Harold made the decision to have his hip replaced, he phoned Dr. Davis' office to learn if there was anything he could do to prepare for surgery: "So I began riding a stationary bike to build up muscle and prepare my hip area for the operation."

Harold's hip replacement surgery took place on March 28, 2007. "I was up and walking the same day as surgery, which I found astounding," reflects Harold.

Then he went to Joint Academy.

Joint Academy

"Aside from the improvements in surgical techniques and materials, we now have philosophies about rehabilitation that can speed a patient's recovery following total joint replacement," says Dr. Davis. "Joint Academy, our rehabilitation program, begins within one day of surgery.

Elements for a successful doctor-patient relationship

A doctor-patient consultation should result in the patient learning:

- what the problem is
- what the possible solutions are
- what risks and benefits those solutions hold
- what the doctor's recommendations are

About a half-dozen patients usually attend, and they each have a reclining chair. A unit coordinator first explains everything in detail, and then the therapist leads our patients in exercises. The staff is consistent week to week, which leads to better patient care. This type of program allows the hip replacement patient to regain hip strength and range of motion as quickly as possible by helping to strengthen the hip joint, to keep muscles strong and to improve the new joint's flexibility. Today's hip replacement patient is likely to recover more quickly and fully than ever before.

"The staff at Joint Academy is very encouraging," continues Dr. Davis, "and after therapy patients have lunch right there, sitting in their reclining chairs. They are able to meet all the other hip and knee surgery patients and to share experiences."

And the relationship between Dr. Davis and his patients does not stop there. "Many people in our area have no family living nearby, so I also reassure my patients that we have the resources and community connections to make sure that their rehabilitation and well-being are supervised long after they leave the hospital," says Dr. Davis.

Harold came home three days after surgery.

"I was given a book at Joint Academy that lays out an exercise program," says Harold. "As I recall, there are about fifteen exercises to do, twenty times each, twice a day. I don't think I ever missed a session."

Over the course of a month, Harold also attended nine sessions of outpatient therapy at a local therapy center.

"In the sixth week after surgery, I actually played my first nine holes of golf," marvels Harold. "That was so successful and so pain-free that ten weeks out from surgery I had not only played six more rounds of nine holes but also another six rounds of eighteen holes, all with no ill effects.

"Dr. Davis' skills are unquestionably superb. My results just confirm that he is super at what he does." **FHCN—Kris Kline**

Here for you

Dr. Davis looks forward to meeting the readers of Florida Health Care News and welcomes your questions about joint replacement. To schedule a consultation, please call (941) 613-3800. His office address is 1951-B Tamiami Trail in Port Charlotte.

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