Further Information
If you require any further information after reading this booklet, please contact:

Physiotherapy Call Centre
Tel: 01926 600818

Equality Statement
At South Warwickshire NHS Foundation Trust we are fully committed to quality and diversity, both as an employer and as a service provider. We have a policy statement in our Equality Strategy that clearly outlines our commitment to equality for service users, patients and staff:

- You and your family have the right to be treated fairly and be routinely involved in decisions about your treatment and care. You can expect to be treated with dignity and respect. You will not be discriminated against on any grounds including age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex or sexual orientation
- You have a responsibility to treat other service users, patients and or staff with dignity and respect

Our information for patients can also be made available in other languages, Braille, audio tape, disc or in large print.

PALS
We offer a Patient Advice Liaison Service (PALS). This is a confidential service for families to help with any questions or concerns about local health services. You can contact the service by the direct telephone line on 01926 600054, by email: Pals@swft.nhs.uk or by calling in person to the PALS office which is located in the Lakin Road entrance to the hospital.

Advice for Patients Following Patella (Knee Cap) Dislocation

THERAPIES SERVICE

Patient Information Leaflet

If you are unable to attend your appointment please telephone 01926 600818 to cancel your appointment
What is patella dislocation?

The knee joint is made up of four bones - the femur (thigh bone), the tibia (shin bone), fibula (outer shin bone) and patella (kneecap). The knee cap is situated in a triangular groove at the front of the thigh bone and moves up and down when you bend and straighten your knee. The knee cap is held in position by muscles and ligaments.

Knee cap dislocation occurs when the knee cap slips out of the groove due to a traumatic collision or awkward twisting movement. The knee cap commonly dislocates sideways appearing on the outer side of the knee. The dislocation can cause stretching or sometimes tearing of the soft tissues around the knee cap.

Frequently asked questions:

Q. How long will I need crutches?

A. This will depend upon the individual injury and you. The aim of physiotherapy is to get you off your crutches as soon as possible. Your physiotherapist will be able to advise you further on this.

Q. When will I be able to drive again?

A. To drive we advise you need to be able to walk without crutches, be pain-free and safely perform an emergency stop. “It is the responsibility of the driver to ensure that he/she is in control of the vehicle at all times and to be able to demonstrate that is so, if stopped by the police” (www.dvla.gov.uk).

Q. When will I be able to play sport?

A. This will depend upon the individual injury and you. Your progress is largely dependent on the success of your Physiotherapy and your willingness to do the exercises prescribed.

How long will I be off work?

A. This is dependent on your type of work. Most employers recommend that staff should not be at work whilst on crutches.
Exercise progressions

Your physiotherapist will advise you when you are able to progress to the following exercises.

Sit upright in a chair. Pull your toes upwards and then straighten your knee slowly. Hold for 10 seconds.

Sit with a ball either between your feet or knees. Squeeze the ball whilst straightening and bending your knee slowly. Repeat 10-30 times.

Stand balanced without any on your injured leg. Hold the single leg position for up to 30 seconds. Repeat 3 times.

Stand with your back against a wall and your feet shoulder width apart. Slide down the wall until you’re in a sitting position. Don’t let your knees drift together or go past your toes. Hold the position for 5 seconds and slowly slide back up. Repeat 10-30 times.

What are the causes of patellar dislocation?
Patella dislocations usually occur in young people and mainly occur during sporting activity. There are several factors which make people more prone to patella dislocations:

- thigh muscle tightness
- generalised joint laxity (hypermobility)
- a knee cap that sits abnormally high
- flat feet
- thigh muscle weakness

What is the treatment for patella dislocation?
Once the knee cap has been returned to the original position it is extremely important to strengthen the quadriceps (thigh) muscles. Exercise will also help to minimise muscle wastage and prevent further dislocations. Most doctors will refer you to physiotherapy for education, advice and exercise rehabilitation.

If your knee is swollen it is important to elevate your leg regularly and apply an ice pack 3 times per day for approximately 20 minutes. Remember to protect your skin with a damp towel and do not put the ice directly against your skin. Do not use ice if you have circulation or sensation problems.

You may need crutches to walk for a few days and simple painkillers may help you to exercise easier. Please speak to your pharmacist for medication advice.

The main exercise principle to follow after a knee cap dislocation is ‘little and often’, gentle walking and exercise will help to minimise knee stiffness, muscle wastage and swelling.
How do I use crutches?

Walking
Place your crutches forward in a wide stance. Step forward with your injured leg so that it is level with the crutches and then bring your non injured leg level.

Climbing stairs
Stand close to the stairs. Hold onto the handrail with one hand. Step up with your un-injured leg first, and then bring your injured leg up onto the same step and then your crutch.

Going Down Stairs
Stand close to the stairs. Hold onto the handrail with one hand and the crutches with the other hand. Put your crutch down onto the lower step and then step down with your injured leg and then your non-injured leg.

Rehabilitation and exercise

It is extremely important to regain the movement and strength in your knee as soon as possible as the muscles help to keep the knee cap in position. These exercises can be started immediately and should ease some of the initial discomfort. Aim to do these exercises regularly throughout the day.

Walking
Place your crutches forward in a wide stance. Step forward with your injured leg so that it is level with the crutches and then bring your non injured leg level.

Climbing stairs
Stand close to the stairs. Hold onto the handrail with one hand. Step up with your un-injured leg first, and then bring your injured leg up onto the same step and then your crutch.

Going Down Stairs
Stand close to the stairs. Hold onto the handrail with one hand and the crutches with the other hand. Put your crutch down onto the lower step and then step down with your injured leg and then your non-injured leg.

Sitting with your back supported.
Slowly bend your knee as much as possible. Keep the knee in this bent position for 5 seconds. Then slowly straighten the leg. Repeat 10 times.

Sitting with your back supported.
Put a rolled up towel beneath your knee. Keep the knee in contact with the towel whilst you lift your heel ‘up and off’ the bed. Hold for 5 seconds. Repeat 10 times.

Lying on your back or sitting with your back supported.
Put your foot up towards you and lift your leg approx 20cm up off the bed, keeping your knee straight. Hold for 5 seconds and repeat 10-20 times regularly throughout the day.