

THE AUTHORS RESPOND

We thank Razii and Morgan-Jones for their comments regarding our study that compared the incidence of serious perioperative complications between unilateral and bilateral total knee replacements.

They make the additional observation that replacing 1 knee when the patient has a deformity in both knees presents difficulties with rehabilitation and may compromise the outcome for the knee. We agree that this may very well be the case, though it was not the focus of our study.

They also comment on the omission of staged procedures, in which the 2 knees are replaced on separate occasions within the first year. In our hospital there were only 69 such patients during the time frame of our study, which did not reach statistical significance; hence, we omitted them.

They encourage further study to “identify which patients might be more suited to a particular method.” This may be useful to surgeons in different settings. In our case, we found that replacing both knees under 1 anesthetic was safe in the

setting of a high-volume community hospital.

Once again, we appreciate the feedback.

Erin Spicer, MSc
Garry Robert Thomas, MSc
University of Toronto
North York General Hospital
Division of Orthopaedic Surgery
Toronto, Ont.

Edward John Rumble, MD
Division of Orthopaedic Surgery
North York General Hospital
Toronto, Ont.

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