

Post-Operative Instructions:

Please contact the hospital booking team to arrange your post-operative follow up appointment in three weeks' time.

Telephone numbers can be found at www.lukecascarini.com

Should you have a post-operative concern, please email pa.consultants@hcahealthcare.co.uk within normal office hours. Outside of office hours, please contact the hospital.

Outside of office hours

Please note that there is a comprehensive out of hours service for our patients post operatively. The following instructions should be followed outside of working hours for any medical situation that requires urgent attention, but which IS NOT a life-threatening situation.

Contact the hospital where you were treated, and they will be able to provide medical advice or arrange for a doctor to see you if required.

The Wellington Hospital

Day Case Unit number is 0203 214 3643 (4th Floor PMC). If the Day Case unit is closed, then Switchboard is 0203 733 5344 and they will bleep Duty Manager.

The London Bridge Hospital

HCA LBH at Guys Reception Desk on 0203 905 4000 and ask to be put through to the duty manager (Ext 48400).

The BMI Sloane Hospital

Main hospital number, 020 8466 4000, then option 4 - (for all other enquiries)

Private Consulting Rooms:

The Platinum Medical Centre
15 - 17 Lodge Road, St John's Wood
London, NW8 7JA
Appointments: 0207 483 5148

The Shard, London Bridge Hospital
St Thomas Street,
London, SE1 9BS
Appointments: 0207 234 2009

The Sloane BMI Hospital
125 Albemarle Road, Beckenham
Kent, BR3 5HS
Appointments: 0208 466 4050

ARTHROSCOPY LEAFLET



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Temporomandibular Joint Arthroscopy

A Temporomandibular Joint Arthroscopy is a diagnostic and therapeutic procedure which uses a dedicated 1.9mm arthroscope. It is undertaken as a day case procedure. It is indicated for TMJ disorders that are refractory to medical management alone or when additional diagnostic techniques are necessary. It can be combined with intra articular medicines including Triamcinolone Hyaluronic Acid, Protein Rich Plasma or Stem Cells.

It can be combined with intra articular laser, coblation or even suture techniques in skilled hands.

Level I Arthroscopy

This is a basic diagnostic and therapeutic procedure. Adhesions can be treated. It can be combined with intra articular medication. It can have a diagnostic benefit, the degree of cartilage damage, synovitis or even disc perforation can be assessed, and this can affect future management. The joint is irrigated under pressure to remove inflammatory mediators and intra articular medication can be used. It is followed by full range of movement exercises.

Level II Arthroscopy

This involves the placement of an additional port using a technique called triangulation. It takes a little bit longer, but it allows the use of intra articular holmium laser therapy or coblation and a biopsy is also possible. Intra articular medication can also be used. The recovery time can be a little bit longer and it may be a little more painful afterwards. It is technically more challenging and more expensive in terms of the equipment used.

Level III Arthroscopy

This involves three ports. It is often combined with coblation or laser therapy to release the anterior attachment of the disc to allow it to be reduced and the disc is arthroscopically sutured. It takes a little longer and is technically very challenging. It is still a day case procedure, but it requires three weeks of limited range of movement and can temporarily alter the way the teeth meet (occlusion).

Complications of TMJ Arthroscopy

Following arthroscopy of the TMJ, you should expect to suffer from swelling, discomfort and bruising. Post-operative bleeding, temporary numbness and temporary weakness of the facial muscles are all common.

Not all patients get a dramatic benefit from arthroscopic procedures. Approximately one quarter of patients do not get a significant therapeutic benefit and subsequently require more extensive surgery.

However, there is nearly always a diagnostic benefit, which can influence the choice of subsequent operation. Therefore, it is extremely unusual for a TMJ arthroscopy to not be beneficial.

There are a few rare, but significant, risks including a less than 1% change of injury of one of the small branches of the facial nerve, which could lead to some partial weakness on one side of the face.

The very small puncture wounds do not usually require suturing. There are no scalpel cuts. They require temporary dressing for a day or two.

You will be followed up in clinic by myself two to three weeks following surgery. Appointments should be made by the patient with the hospital booking team.

Post-operative range of movement exercises will be provided in a separate leaflet.