Glenn Porter Osteotomy

Through running I first developed knee issues in 2011. I had an arthroscopy 2012 to fix a meniscal tear.

In 2014 the knee had once again started to cause issue; though consultation the recommendation was to manage the pain with diclofenac. Initially this proved successful to the point that the pain was manageable

Between 2014 and 2018 the knee deteriorated to the point that anti-inflammatories did not have a positive effect in managing the pain – short walks, gardening meant pain, swelling, inflammation and I had developed a hobble

2019 I was referred to Sean O'Leary;

At this point I was 49, I thought my only option was a knee replacement. but my concern was the thought of reduced movement and reduced activity. I had been watching and waiting for a miracle knee cure - stem cell etc.

Based on the state of the joint; Sean laid out his recommendation which was; to shift the weight away from the issue, transfer this back down through the knee, with greater weight bearing being on the good part of the joint. This would be obtained by cutting through the bone, creating a seven-degree angle change, which would shift the bearing weight – this was called an Osteotomy.

The thought of bone cutting, metal work, post op pain and a long rehab was not a good one. It was though 100% my decision that this was the best option. I committed to the operation in March 2020. In preparation I did as much prep as I could, including losing weight and through cycling I improved my leg strength and cardio.

The first couple of weeks were tough, it hurt a lot, but got through it with pain killers. Within four weeks of the op I was back doing light bike work; within 12 weeks all pain had gone and actively walking and doing longer rides. Within 6 months I was fully active, 10-mile walks and over 2k of mountain biking without issue or inflammation. December 2020, I had the metal work removed. Three weeks later I was once again fully active.

It's noticeable that as I have regained the correct walking style, my other issue knee has improved significantly, to the point that I am no longer aware of it. I'm convinced this is due to me no longer depending on this joint as much.

If you can relate to any of the above and are thinking of this procedure, then I would recommend it without hesitation: Sean can reference enough examples that help reassure that the probability of success is high and in him you are in experienced hands