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SUPPORT

# INFORMATION & RESOURCES

Summer 2019

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## The Emotional Effects of Joint Replacement

By Elizabeth Landrum, Ph.D.

Osteoarthritis can affect every joint of the body, with hips and knees being particularly vulnerable. After more conservative treatments have been exhausted, total joint arthroplasty (TJA) is a cost-effective, highly successful treatment option. With more than a million TJAs performed in this country annually, these operations can sound like “no big deal.” Of course, any surgery on one’s own body is a big deal; no one signs up for it lightly. However, the promise of relief from continual pain and immobility can supersede the anxiety and stress commonly felt before any operation.

We have all witnessed the smiles and celebrations that often follow a new knee or hip, so it’s easy to assume that anyone will be happier after a replacement, but this is not always the case. In fact, depression following a TJA procedure is actually quite common. Even after the ups and downs that come with pain and impaired mobility, nothing seems to prepare one for feeling depressed during recovery.

Since the subject of post-op depression is seldom discussed between patient and surgeon, experiencing depression is usually surprising and confusing for the recovering patient. It can be as scary as it is bewildering, and tends to be something one doesn’t want to reveal, sometimes leading to increased isolation and loneliness. After all, a joint replacement is often looked at as a “new lease on life;” sadness, loss of interest, and mood swings don’t seem to fit into the equation.

A wave of depression can hit in the hospital, after a few days at home, or even weeks after surgery. Everyone is different, and the degree to which patients experience a bout of depression, the length of time they feel depressed, and how they overcome it, all depend on the individual.

Depression colors everything. It affects behavior, energy, outlook, and it can interfere with desires to be social, to participate fully in recovery, and even to resume pleasurable activities. It’s not surprising that several studies have linked depression with functional outcome after TJA, demonstrating the relationship between the degree of depression and the speed and completeness of recovery. There is a growing body of evidence that psychological factors such as personality, anxiety, and/or depression and negative thinking styles influence both patient satisfaction and recovery time. Also, people with moderate anxiety or depression have more complications after their replacements, and those with a major depressive disorder consume more opioids immediately after TJAs.

The various factors contributing to post-op depression include reactions to anesthesia, a “surgical let-down period” (when the anticipation

and adrenaline are over and life hasn’t yet improved), “cabin fever,” and feeling dependent. Being unable to do simple and usual tasks for oneself is difficult for most people, especially for those who see themselves as independent and self-sufficient. It can be hard to ask for help and easy to feel like a burden or a drag on others. When there are changes in one’s self-image, this pattern is further compounded.

It’s important to know clearly what to expect, as expectations and beliefs are known to affect recovery. Frustration and disappointment in the seemingly long recovery process are expected, yet difficult. Focusing on how far one has progressed, not just on how far one has to go, can help. While prescribed exercises are always involved in recovery, the motivation is not always there. Still, exercise is one of the best things one can do to improve mood and relieve stress, as well as to propel recovery forward.

Much of the body’s energy resources go into physical healing after any trauma, including surgery, and there may be less available for other things. This can be complicated by poor quality sleep (normal after surgery), sometimes leading to vicious cycles of lowered energy, depression, worry, more sleeplessness, etc. As healing continues during sleep, the quality and quantity of sleep patterns during recovery should always be addressed. There are many practical suggestions available (through literature, the internet, physicians, therapists) for getting a good night’s sleep. Naturally, healthy nutrition will also promote mental and physical well-being.

Pain itself affects both mind and body. It’s hard to be positive when you’re hurting, and stress or depression may exacerbate pain. Unfortunately, depression is also a potential side effect of narcotic painkillers. Healthy short-term pain management is crucial and may involve a variety of techniques, such as imagery or meditation, as well as medication. Acceptance that the situation (with its discomforts, frustrations, and necessary dependency) is temporary often helps people “push through.”

While social isolation may be unhealthy, reaching out to family and friends usually reaps benefits. Supporters may need to understand the natural ups and downs of TJA recovery, and how and when to suggest further assistance. Daily self-monitoring can reveal what’s happening in the individual’s unique interplay of medications, activities, exercise, sleep, mood, etc. When needed or desired, there are several proven professional therapies available. A temporary state of anxiety or depression may not be unusual, yet it’s important that it not become a more chronic condition, affecting one’s ongoing quality of life — a life that can be greatly enhanced by enjoying a new joint.

*If you are planning joint replacement, please contact Lopez Island Hospice & Home Support at 360-468-4446 for help during your recovery.*