Physical Therapy & Sports Rehab, Inc.

Norwood & Norfolk, MA | (781) 769-2040 | www.ptandsr.com

Meniscal Tears of the Knee

What You Need to Know

What Is the Meniscus?

The meniscus is a C-shaped wedge of cartilage that sits between the thigh bone (femur) and shin bone (tibia) in the knee. Each knee has two — the medial meniscus on the inside and the lateral meniscus on the outside. They act as shock absorbers, distribute load across the joint, and provide stability. When one tears, it can cause pain, swelling, and mechanical symptoms in the knee.

What Types of Tears Occur?

- Acute tear — from a sudden twisting or impact injury, common in sport
- Degenerative tear — develops gradually with age and wear, often without a specific injury
- Radial, horizontal, vertical, bucket-handle — different tear patterns that affect treatment decisions

Whether a tear requires surgery depends on its location, pattern, size, your age, and your activity goals. Many tears — especially degenerative ones — respond very well to physical therapy without surgery.

What Does It Feel Like?

- Pain along the inner or outer joint line of the knee
- Swelling that develops hours after an injury or with activity
- Stiffness, especially in the morning or after sitting
- A clicking, catching, or locking sensation with movement
- Difficulty fully straightening or bending the knee
- Pain with squatting, twisting, or pivoting
- A feeling of the knee giving way

What Makes It Worse?

- Deep squatting or kneeling
- Twisting or pivoting on a bent knee
- Going up and down stairs
- Running or jumping
- Prolonged walking on uneven surfaces

Surgery vs. Physical Therapy — Which Do I Need?

Research shows that for many meniscal tears — particularly degenerative tears in adults over 35 — physical therapy is equally effective as surgery in reducing pain and restoring function. Surgery is more likely to be needed when:

- The knee is locking (getting stuck and unable to straighten)
- The tear is in the outer "red zone" where blood supply is good and repair is possible
- Conservative treatment has failed after a dedicated course of PT
- The tear is associated with an ACL injury or other significant structural damage

When Should I Be Concerned?

- True locking — the knee is stuck and cannot be straightened even passively
- Severe swelling that develops rapidly after injury
- Complete inability to bear weight
- Significant instability or giving way of the joint

The Good News

Many meniscal tears heal or become asymptomatic with physical therapy. Treatment focuses on reducing swelling, restoring motion and strength, improving neuromuscular control, and returning you to your activities safely. Even when surgery is needed, PT before and after the procedure dramatically improves outcomes.

Most patients with meniscal tears see significant improvement within **6 to 12 weeks** of dedicated physical therapy.