

## WHAT IS GENICULAR ARTERY EMBOLIZATION?

Genicular artery embolization (GAE) is a new minimally invasive procedure that blocks blood supply to the inflammation associated with osteoarthritis (OA). This inflammation, known as synovitis, has been found to be a primary contributor to OA pain and progression.

GAE is performed by an Interventional Radiologist (IR), a subspecialist doctor who performs minimally-invasive image-guided procedures. IRs use cutting-edge endovascular techniques (inside blood vessels) to physically block the OA synovitis, without the need for surgery. General anaesthesia is not required, as GAE can be performed using conscious sedation. GAE provides a treatment opportunity for patients who are no longer responding to conservative therapies, but are not yet ready for a knee replacement or are poor surgical candidates for other reasons.

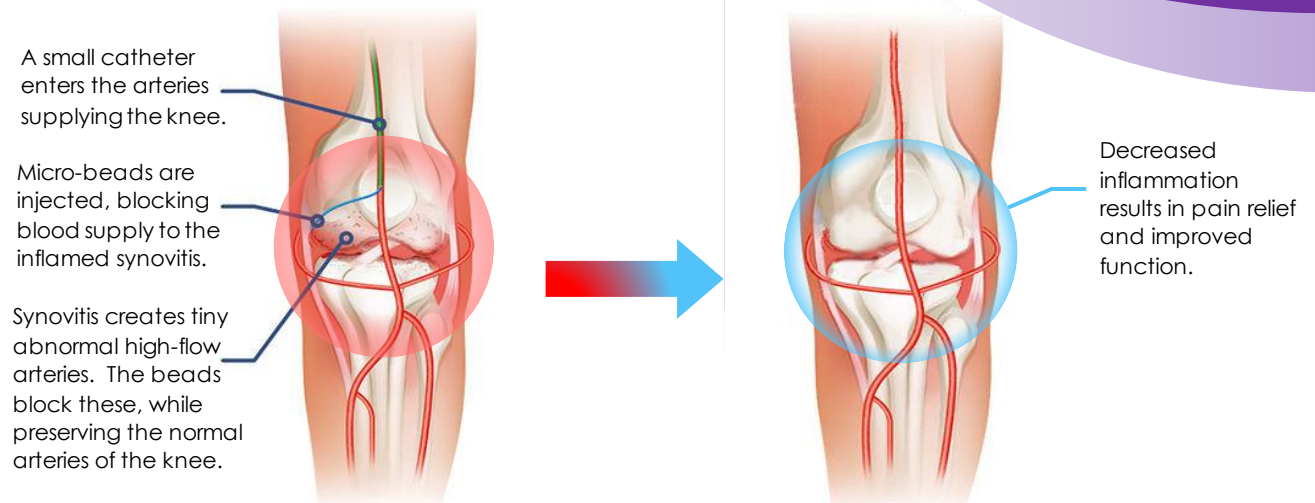
## THE PROCEDURE

A catheter (a small tube) is inserted into the artery in your groin or foot. Using X-ray guidance, the catheter is advanced into the arteries of your knee. Microscopic hydrogel beads are injected and block the tiny abnormal arteries that supply the synovitis, starving the inflammation of oxygen and nutrients. These tiny abnormal arteries do not supply the normal tissue of the knee, in fact the goal of GAE is to preserve the knee's normal blood supply.

## IS GAE RIGHT FOR ME?

Not all OA responds to GAE. Inflammation needs to be present for GAE to work. People who respond best to GAE tend to have the following characteristics,

- Mild to moderate OA.
- Pain that has become resistant to conservative therapies.
- Tenderness on palpation.
- Synovitis on MRI or bone scan.







# GENICULAR ARTERY EMBOLISATION

MINIMALLY INVASIVE ENDOVASCULAR  
TREATMENT OF OSTEOARTHRITIS

our policy that all candidates who are not under the care of an Orthopaedic surgeon will be referred on for an orthopaedic surgical opinion.

## AFTER THE PROCEDURE

Depending upon the patient, GAE can be performed as a day case or a single overnight hospital stay for monitoring and analgesia. Although the procedural pain typically improves within a week, it can take up to 4 weeks for the knee discomfort to completely settle, particularly if extensive inflammation was treated. Several clinic follow-ups are scheduled in the first year.

## BEFORE THE PROCEDURE

A referral from your treating doctor or surgeon is required. At the initial consultation the Interventional Radiologist will evaluate your knee and medical history to ensure you are an appropriate candidate for GAE. You may need to undergo additional tests, such as an MRI. OA pain is most often the result of multiple contributing factors. It is therefore

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Minimally Invasive, Maximum Results