Isolated Medial Patellofemoral Ligament Reconstruction In Patellar Instability - Trochlear Groove Make A Difference?

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Summary:
Isolated Medial Patellofemoral Ligament Reconstruction in patellar instability presents a functional improvement, with a low rate of complications and failure, regardless of the pre surgical Tibial Tuberosity – Trochlear Groove distance.

Data:
Introduction: Medial patellofemoral ligament reconstruction (MPFLR) is used in most patellar instability surgeries, there is controversy on adding a tibial tuberosity osteotomy (TTO). Objective: To describe the results of isolated MPFLR in Patellar instability according to the Tibial Tuberosity - Trochlear Groove distance (TT-TG) Methods: Retrospective study of patients with patellar instability with a mature skeleton in one center between 2016 and 2021, using isolated MPFLR. Patients with incomplete clinical and/or radiological records and follow-up less than one year were excluded. Pre-surgical demographic and radiological data (TT-TG, Caton-Deschamps (CD) index, patellar tilt, trochlear dysplasia) was recorded. Patients were divided in three groups according to TT-TG distance (Group 1: <17mm, Group 2: 17-19, Group 3: >20mm). A pre and post surgical Kujala score was performed. Local complications, satisfaction, recurrence and/or re-intervention were recorded. Pre-surgical variables between groups, intra and inter-group Kujala differences were compared using Bartlett’s test. Consent from the patients and approval from the local ethics committee were obtained. Results: 67 patients met the selection criteria, mean age of 23 years, 70% were women. There were no pre surgical, radiological nor follow-up differences between the groups (average 27 months). Pre and post surgical Kujala score, respectively - Group 1: 37 - 78 - Group 2: 37 - 78 - Group 3: 39 - 79 All groups had a significant improvement (p < 0.05), there were no significant differences in improvement between groups (p > 0.05). There were three patients with a redislocation episode, all in group 1. One patient had a mobilization under anesthesia due to an arthrofibrosis (Group 2). 97% of all cases reported being satisfied. Conclusion: Isolated MPFLR in patellar instability presents a functional improvement, with a low rate of complications and failure, regardless of the pre surgical TT-TG.

Category: Knee - Patellofemoral

The Prevalence and Predictors of Articular Cartilage Damage at the Time of Medial Patellofemoral Ligament Reconstruction

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Summary:
Substantial cartilage injuries are present in 56% of patients who undergo primary isolated MPFL reconstruction, with medial patellar lesions being the most common. Increased age at surgery is associated with an increased risk of substantial cartilage damage.

Data:
Introduction: Recurrent patellar instability is a debilitating condition that is often managed surgically with reconstruction of the medial patellofemoral ligament