

ST THEFT

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Title: Equation Predicting Change in Tibial-Tuberosity to Trochlear-Groove (TT-TG) Distance Following Tibial Supratubercle Osteotomy

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Disclosures:

All authors have no conflicts of interest to disclose.



INTRODUCTION

Supratubercle tibial rotational osteotomy: useful adjunct for treating patellar instability.

 Simultaneously addresses increased tibial-tuberosity to trochlear groove (TTTG) distance and excessive external tibial torsion

• Jud et al. (AJSM, 2020): 1° IR = \sim 0.68 mm decrease TTTG

Objective: Derive a novel, anatomically individualized equation to accurately predict Δ TTTG from pre-operative CT scans.





<u>METHODS</u>

<u>4 VARIABLE EQUATION:</u>

The corrected change in length of TTTG, can be more accurately estimated as:

$$\Delta TTTG' = \sqrt{2R^2(1 - \cos(\alpha))} * \cos\left(\cos^{-1}\left(\frac{R^2 + TT^2 - \Delta x^2}{2R(TT)}\right) - \frac{\alpha}{2}\right)$$

COMPARISON WITH LINEAR RELATIONSHIP AND 'TRUE' VALUE: Compared 2 methods to compute the $\Delta 777G$ to the 'True' change in TTTG (simulated radiographically):

- 1. 4-Variable Equation
- 2. Jud et al. Proportion: $\Delta TTTG = 0.68(\alpha)$
- 2-independent reviewers: measured with InteleViewer 4.14.1
- Statistical analysis with SPSS (IBM, Armonk NY): 1-way ANOVA & Student's t-tests







<u>METHODS</u>

PATIENT SELECTION

- 37 patients known for miserable malalignment syndrome (MMS) underwent simulated de-rotations of 5, 10 and 15° for both knees
- \rightarrow N = 222 total CT images
- Inclusion criteria:
 - Age: 12-21 years
 - Any gender
 - Bilateral pre-operative 3D-CT scans
 - Clinical diagnosis of lower limb torsional deformities
- Exclusion criteria:
 - Incomplete medical charts or imaging
 - Other MSK diagnoses (cerebral palsy, arthrogryposis)





RESULTS

PATIENT DEMOGRAPHICS

- 37 patients
 - \rightarrow n = 222 simulated derotations
 - ♂- 3 Male
 - Q 34 Female
- - Average age: 15.7 ± 1.86 years

Example Pt #17 Rt knee:

- (A) Axial CT cross-section:
 - Left: femur at the level of the femoral condyles
 - Right: level of the tibial tuberosity
- (B) TTTG measurement:
 - Left: at 0° pre-correction
 - Right: post-derotation of 15°



SIMULATED DEROTATION (Pt #17)







RESULTS: ΔTT-TG COMPARISON

5° Derotation



Student t-test	p-value
True v. Jud	< 0.00001
True v. 2 Var	0.0515
True v. 4 Var	0.1032



Student t-testp-valueTrue v. Jud<0.000</td>

True v. 2 Var True v. 4 Var

15° Derotation







10° Derotation







$RMSE = 0.346 \pm 0.467 mm$

 $RMSE = 3.240 \pm 1.637 mm$

RESULTS **RATER VALIDATION FOR 4-VARIABLE EQUATION**

INTER-RATER VARIABILITY

INTRA-RATER VARIABILITY



No statistically significant difference for inter- and intra-rater variability!





CONCLUSIONS

<u>OUTCOMES</u>

- 1. 4-variable equation had the lowest RMSE for $\Delta TTTG$
- 2. "True" and 4-variable: no statistically significant difference for 5, 10 &15° derotations
- 3. "True" values were statistically significant different from Jud et al. values for all derotation angles (p < 0.001)
- Intra- and inter- rater analyses: no statistically significant difference for 4variable equation



LIMITATIONS:

- 1. Radiographic proof of concept study
- 2. Soft tissue factors not considered
- Assumptions may not hold true in real world settings given lack of clinical post-operative assessments

<u>ULTIMATE GOALs:</u>

Improve surgical planning and patient outcomes by:

- Using an accurate and precise formula to predict $\Delta TTTG$
- Account for unique differences in patient anatomy in predicting postoperative correction



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