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# The Predictability And Reliability Of A ‘Sentinel’ Vessel As An Anatomical Landmark During Hamstring Tendon Harvesting – A Prospective Study

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The authors have nothing to disclose, nor have any conflicts of interest with any commercial actors present in this poster.



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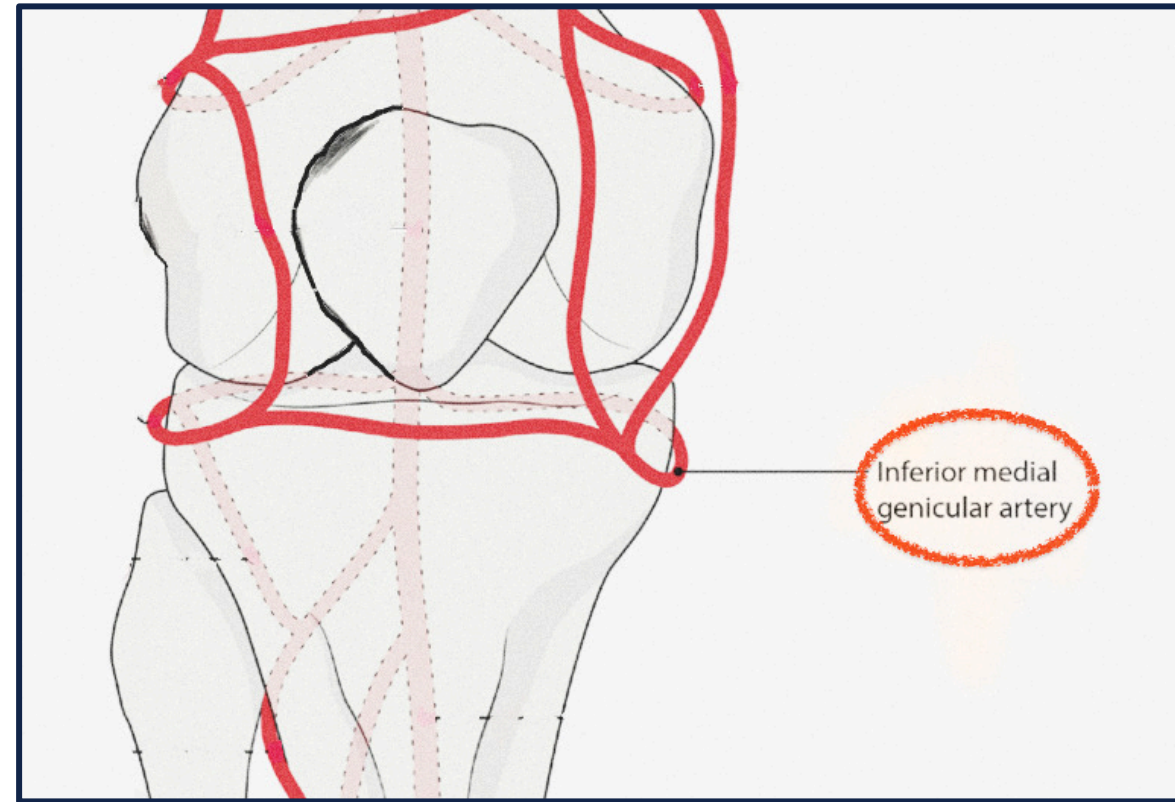
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# Introduction

Hamstring identification and harvesting is one of the most important steps of ACL reconstruction (ACLR).

Recent studies have described a vascular landmark that aimed to improve procedure predictability and decrease harvest-related complications.

It is reported that the vascular landmark called either “sentinel vessel” or **inferior medial geniculate artery branch (bIMGA)** may not be present in all patients.



# Study goal

To assess the encountering of this vascular structure (bIMGA) during our ACLRs and determine if it can be used as a reliable anatomical landmark during graft harvesting.



# Material and methods

Consecutive patients that underwent ACLR with hamstring tendon (HT) autograft, operated by the same main surgeon and surgical team, in the same hospital.

The presence/absence of the bIMGA was noted for every patient.

The presence/absence of the bIMGA was associated with age interval, sex, and level of physical activity.

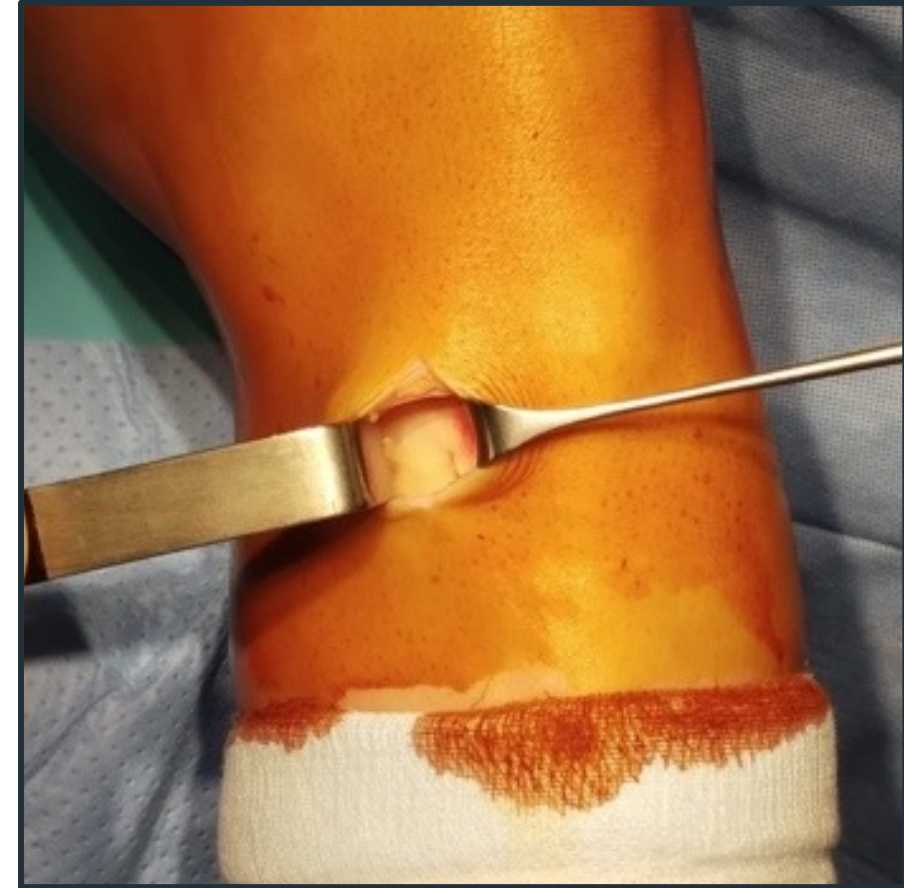


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# bIMGA identification



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# Results

213 patients (135 males and 78 females), 15 - 58 years old.

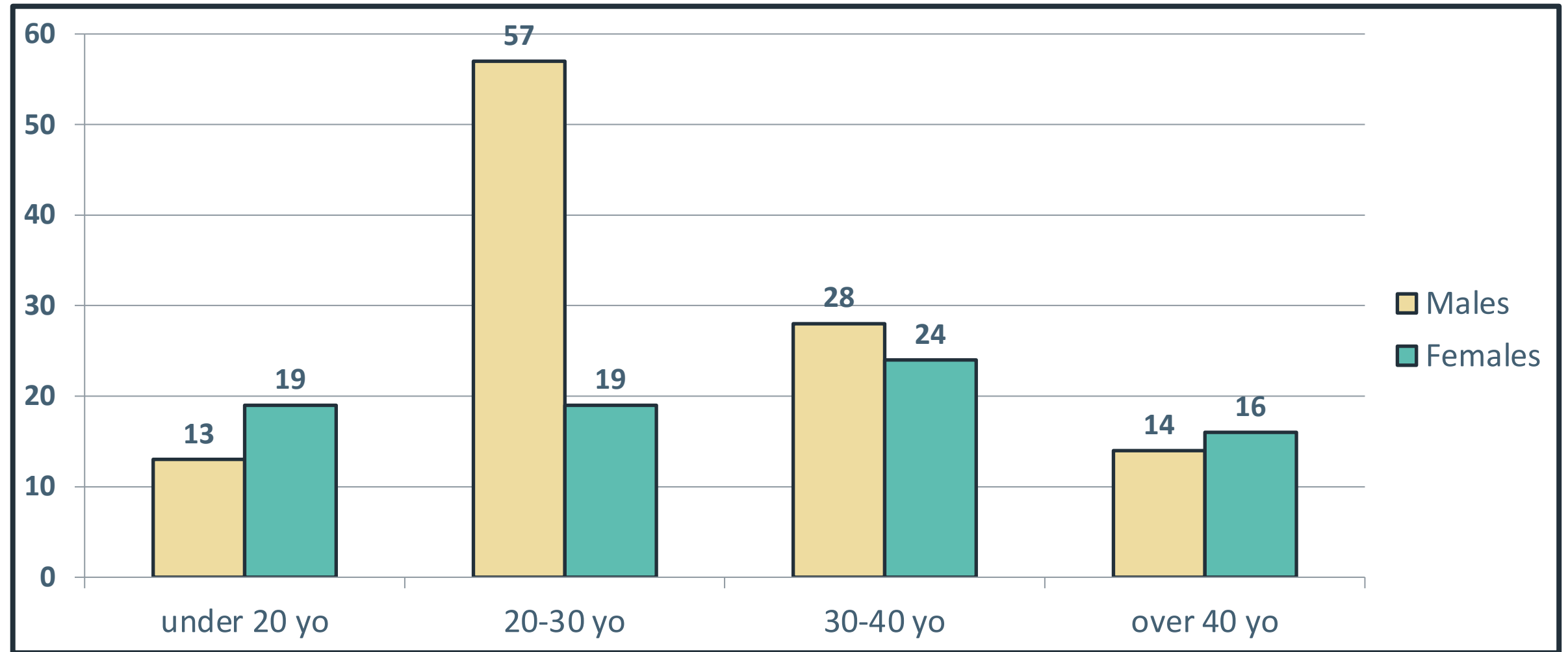
bIMGA encountered in 73 males (54.07%) and 26 females (33.3%).

**Highest incidence under 20 years old** for males (9/13; 69.2%) and females (12 /19; 63.1%) alike.

**No statistical significance between vascular presence and patient baseline characteristics.**



# Patient age distribution

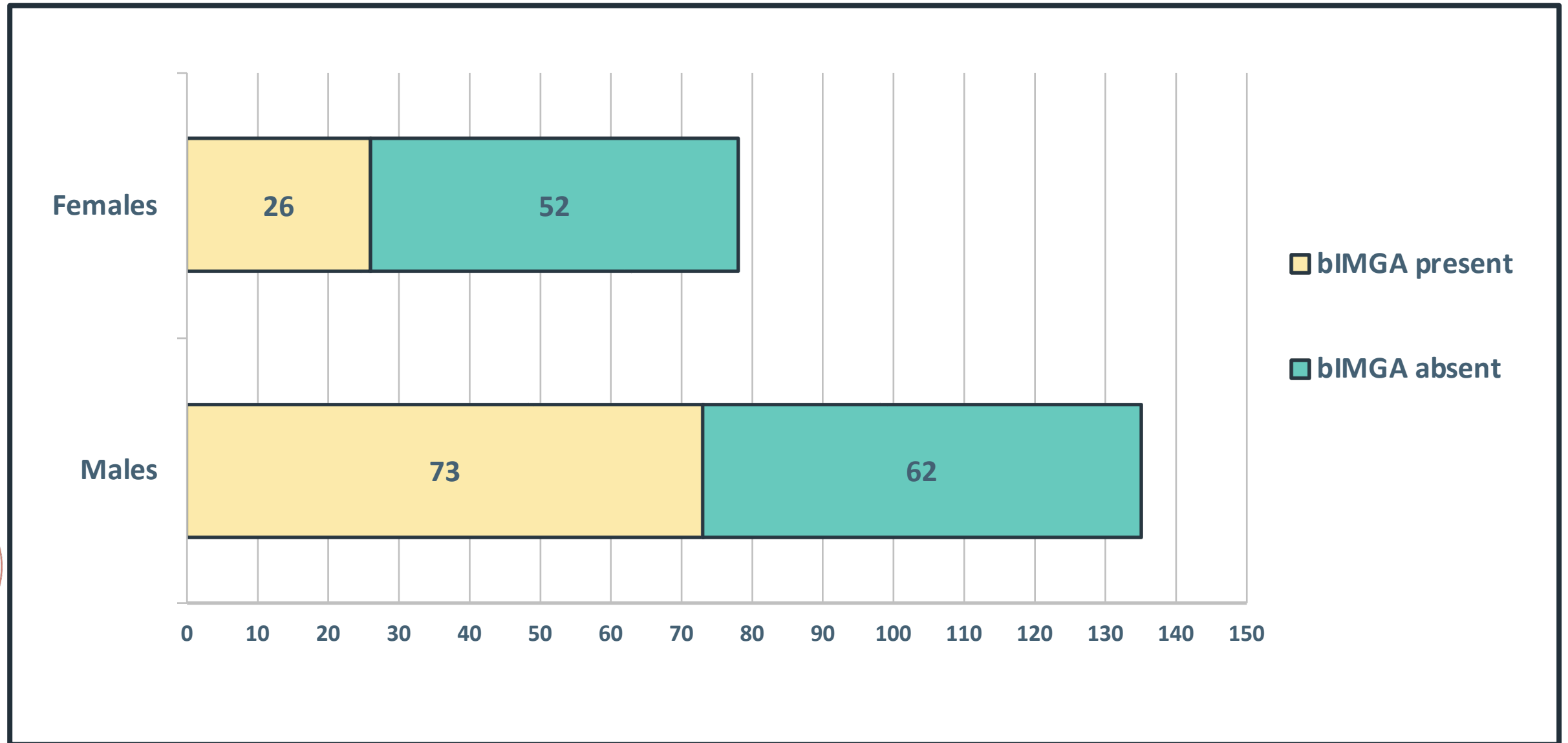


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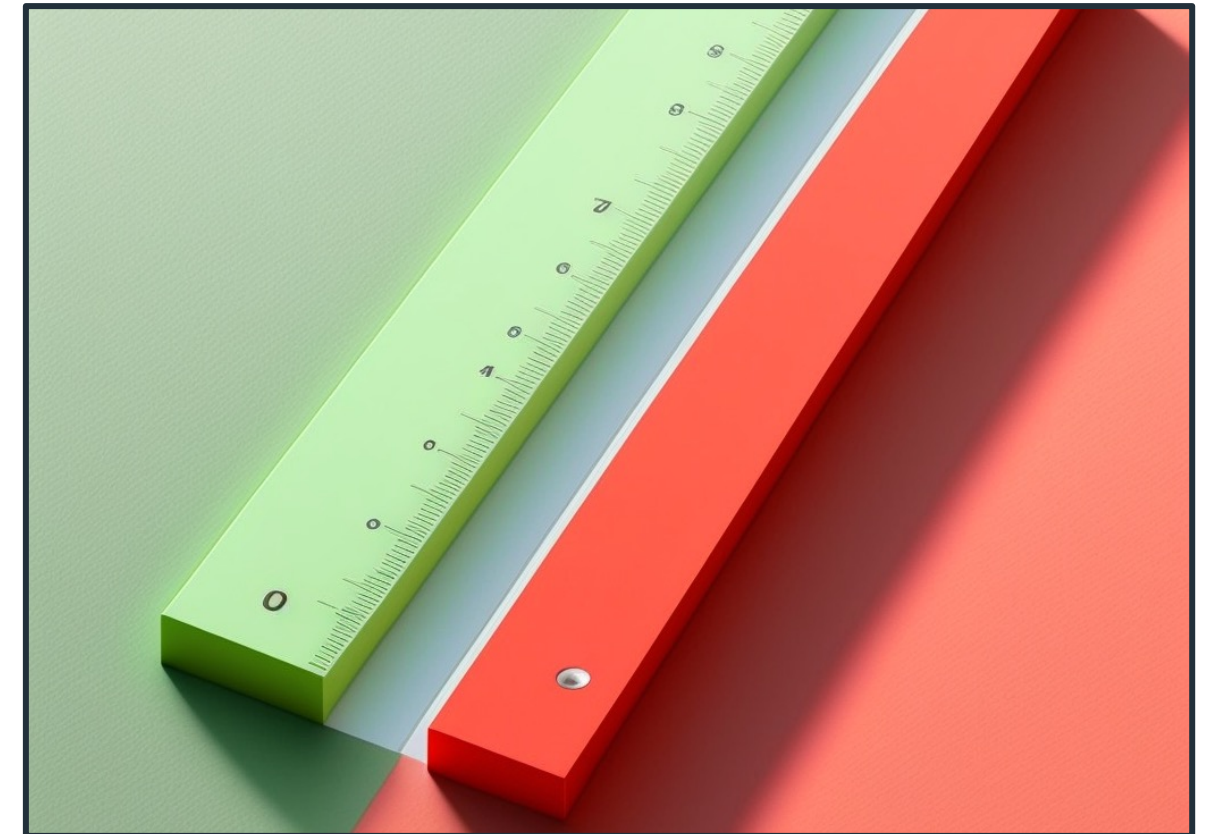
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# Gender related findings of the bIMGA



# Conclusion

**The authors can't recommend using the bIMGA as a reliable landmark during HT harvesting.**



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