

Double-bundle medial patellofemoral ligament reconstruction using patellar suture anchor fixation for patellar instability:

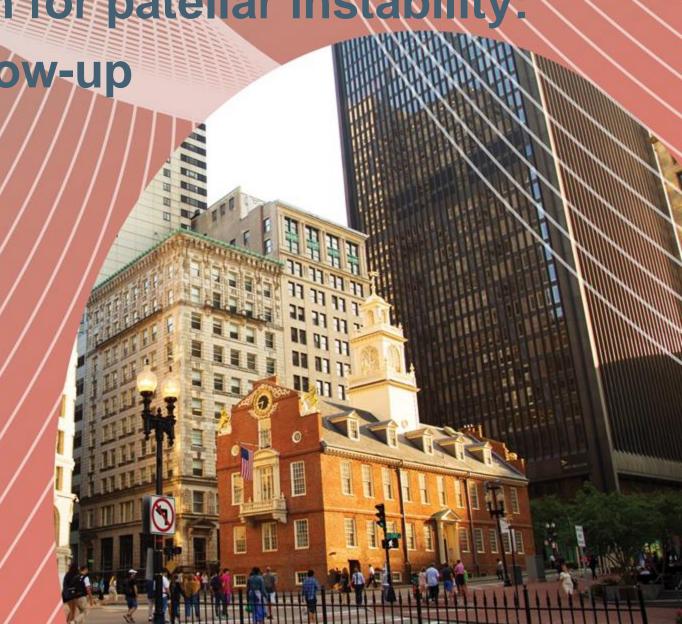
A prospective study with 5-year follow-up

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We have no financial conflicts to disclose

## Introduction

- The treatment of patellar instability;
   Currently, the first choice procedure MPFL reconstruction
- Isolated MPFL reconstruction for patients with normal or mild anatomical factor; good short-term results, low recurrent dislocation
- To date,
   Insufficient midterm clinical reports on isolated MPFL reconstruction
   Especially, no prospective midterm clinical study



## Purpose

Isolated double-bundle MPFL reconstruction using patella suture anchor technique with hamstring autograft.

 To evaluate prospectively mid-term (5 years follow-up) clinical and radiologic results



## **Materials and Methods**

- Prospective Design;
   between March 2013 and February 2017
- Indication for isolated MPFL reconstruction
   symptomatic patients with at least 2 episodes patellar dislocations
- Contraindication for isolated MPFL reconstruction high degree of trochlea dysplasia ( Dejour type D)

  TT-TG distance ≥ 20mm

  congenital or habitual dislocation

Inclusion	Exclusion
participate until the 5-year follow-up	combined with bony procedure no acquisition of a regular series of radiographs



## Materials and Methods

Clinical evaluation

preoperatively, at 6, 12, 24, and 60 months after surgery

Functional evaluation	Physical examination
Kujala score	apprehension test
Lysholm score	patellar compression test
Tegner score	range of motion (ROM)

- Radiographs
  - 1. AP, lateral, and axial Merchant views: preoperatively, at 24, 60 months postoperatively
  - 2. MRI: preoperatively

Lateral view	patellar height: modified Insall-Salvati (MIS) ratio
Merchant view	congruence angle (CA) lateral patellofemoral angle (LPFA)
MRI (preoperative)	tibial tuberosity-trochlear groove (TT-TG) distance Trochlear dysplasia: defined by Dejour



## Results

### Demographic data

Total of 27 patients (27 knees)

Patient Characteristic	Data	
No. of MPFLRs	27	
Female/male	16/11	
Age (years)	22± 6.4 (range, 16-28)	
Right/ left	12/15	
Harvested graft Semitendinosus/gracilis	19/8	

Concomitant procedures

 lateral release in 7 patients
 chondroplasty in 5 patients



## Radiologic Assessments

The shape of the trochlea; driteria of Dejour.

No dysplasia	5
Dejour A	11
Dejour B	10
Dejour C	1
Dejour D	0

The mean preoperative TT-TG; 15.8 ± 4.4 mm (range, 10.6 - 19.5)

<15mm	11
15 ≤ < 20mm	16
≥ 20mm	0

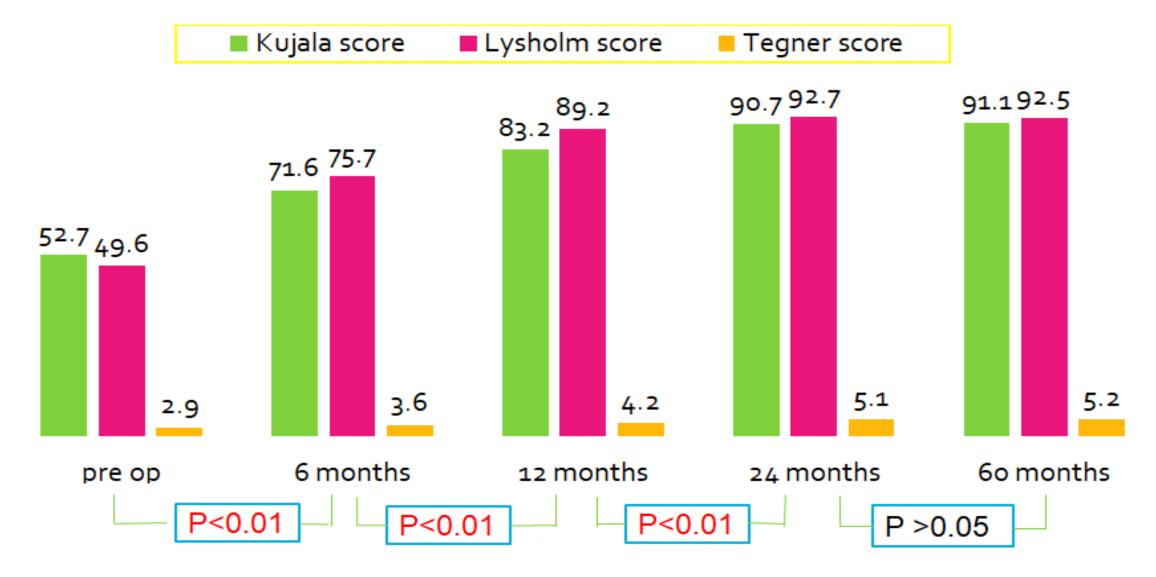
#### Complication

patellar redislocation or subluxation : none

patellar fracture : none

infection: none

## **Clinical assessments**

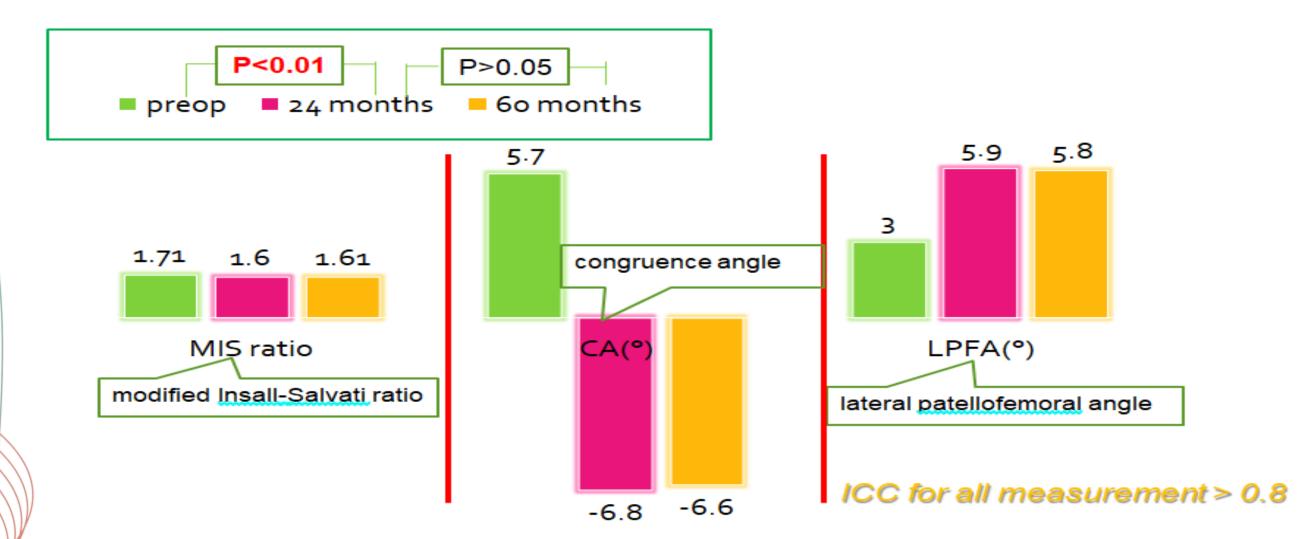


Serial significant improved during 24 months (P<0.001)



No statistical difference between 24 and 60 months

## Radiologic Assessments



• Statistical differences between preoperatively and 24 months (P<0.001)

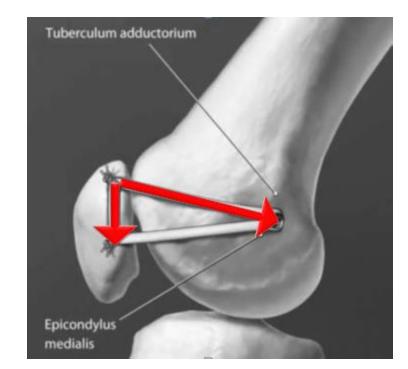


No statistical difference between 24 months and 60 months

# Additional finding (Significant decrease of patella height)

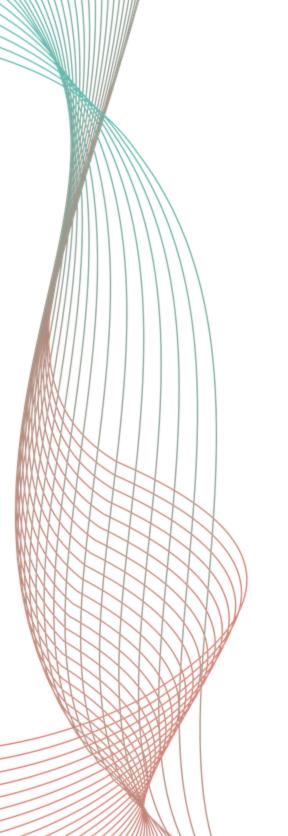
#### MIS ratio

	preoperatively	24 Mo	60 Mo
MIS ratio	1.71 ± 0.17	1.6 ± 0.13	1.61 ± 0.14



\*\* Significant decrease of patella height (P<0.01)
In our opinion,
inferomedial patellar traction of reconstructed ligament.





## Conclusion

Isolated double-bundle MPFL reconstrucion using patella suture anchor technique with hamstring tendon autograft

- The results of 5-year follow up: Prospective trial
  - Clinical outcomes significantly improved for 2 years and maintained to 5years without deterioration
  - All radiologic results improved
  - no re-dislocation or no patellar fracture



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