



Femoral Button is Not Applied: Does/It Matter ?

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Disclosures:

- Authors (or a member of their immediate family) **DO NOT** have a financial interest or other relationship with a commercial company or institution.

- Authors declare that there is NO CONFLICT OF INTEREST.



BACKROUND:

 The major disadvantage of suspended graft fixation is the interposition of soft tissue between the button and the cortical bone, with a detached appearance that is source of concern for the surgeon



OBJECTIVE:

 The aim of our work was to evaluate the clinical repercussion of femoral button detachment on the postoperative evolution



METHODS:

 We reviewed all patients operated between 2017 and 2020 who had arthroscopic single-bundle anterior cruciate ligament (ACL) reconstruction with suspended femoral fixation

 Any femoral button that was not perfectly applied to the cortex was considered detached









METHODS:

Postoperative anterior residual laxity was assessed by the Lachman test

 At 18 months follow-up, we assessed pain, stability and mobility of the knee according to the Lysholm-Tegner functional score



RESULTS:

 32 patients out of 297 operated on had a non-applied femoral button.

 56% of our patients had less than 3 mm detachment on postoperative antero posterior radiograph, 25% between 3 and 6 mm and 19% greater than 6 mm; among them 2 patients underwent a revision surgery for a major button detachment beyond the ilio tibial band.



RESULTS:

 Four patients had residual laxity with no functional impact and two patients had an iliotibial band syndrome that was improved by medical treatment and rehabilitation

 At 18 months follow-up and according to the Lysholm-Tegner score, for the group of patients with an applied femoral button: 70% of patients had an excellent functional result, 17% good result, 9% fair result and 3% a poor result



RESULTS:

 For patients with detached femoral button: 63% of patients had an excellent functional result, 28% good result and 9% had a fair result

 Our findings also reveal that there was no significant difference in failure rate between applied and detached femoral button

 Furthermore, there was no statistically significant correlation between the detachment degree and the functional results



DISCUSSION:

• Soft tissue interposition between the button and the cortical bone remains quite frequent, especially at the beginning of the learning curve without a major impact on functional outcomes [1,2]

 Thus, many authors [3-5] proposed some technical tips and methods for prevention of soft tissue interposition such as direct arthroscopic visualization to confirm proper femoral button deployment and specially to prevent its extension beyond the vastus lateralis fascia or iliotibial band which might have a negative impact



CONCLUSION:

 Our study showed that a non-perfectly applied femoral button does not have a negative impact on the postoperative evolution, however major detachment extending beyond the Ilio tibial band should not be ignored



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