Good results at 10-year follow-up of arthroscopic "all inside" meniscal sutures without adjuvant technique





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Disclosure

No disclosure related to this presentation





Introduction

- Suture of meniscal lesions is currently recommended,
- Several adjuvant techniques have been proposed to optimize meniscal healing.
- The aim of this study was to analyze the results at 10 years follow-up of a consecutive series of arthroscopic "all inside" meniscal sutures performed without any adjuvant technique.





Methods

- > Single-center retrospective study.
- All patients were re-interviewed by phone after 10 years.
- > The primary endpoint was the rate of secondary meniscectomy.
- The survival rate of the initial suture (with the criterion of "death" being the need for a repeat operation on the sutured meniscus) and the survival rate of the sutured meniscus (including any repeat suture) were calculated.
- Final functional outcomes were assessed by the Lysholm score



Results



- > 73 cases were included, with concomitant reconstruction of anterior cruciate ligament in 31 cases (42%).
- ➤ 20 patients required re-intervention on the initially sutured meniscus within a postoperative period of 6 to 96 months: 12 cases of partial meniscectomy (16%) and 8 cases of repeat suture (11%), none of whom underwent subsequent meniscectomy.
- The meniscectomy rate was 16%, not statistically different from the expected rate of 20% (p=0.45).
- The survival rate of the initial meniscal suture at 10 years was 67%.
- The rate of initially sutured meniscus at 10 years was 79%
- The median Lysholm score for patients without meniscectomy was 89 points (range, 59 to 100 points).





Conclusion

- > This study confirms the long-term success of meniscal sutures.
- The absence of adjuvant techniques during meniscal suturing does not seem to negatively influence the clinical success rate of suture.
- Abandoning these procedures could lead to a broadening of the indications for meniscal suturing.





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