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Results of MPFL reconstruction using soft tissue fixation technique associated with a procedure on the ATT for patellar instability : An average follow-up of 8.8 years

AUBEY Marine, EMERY Aurore, FERREIRA Alexandre, DUVAL Grégoire, LE DREAU Rachel,
MERGENTHALER Guillaume, MAROTEAU Gaëlle, HULET Christophe



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Introduction

Patellar instability : A current disease in the young community

Codified management

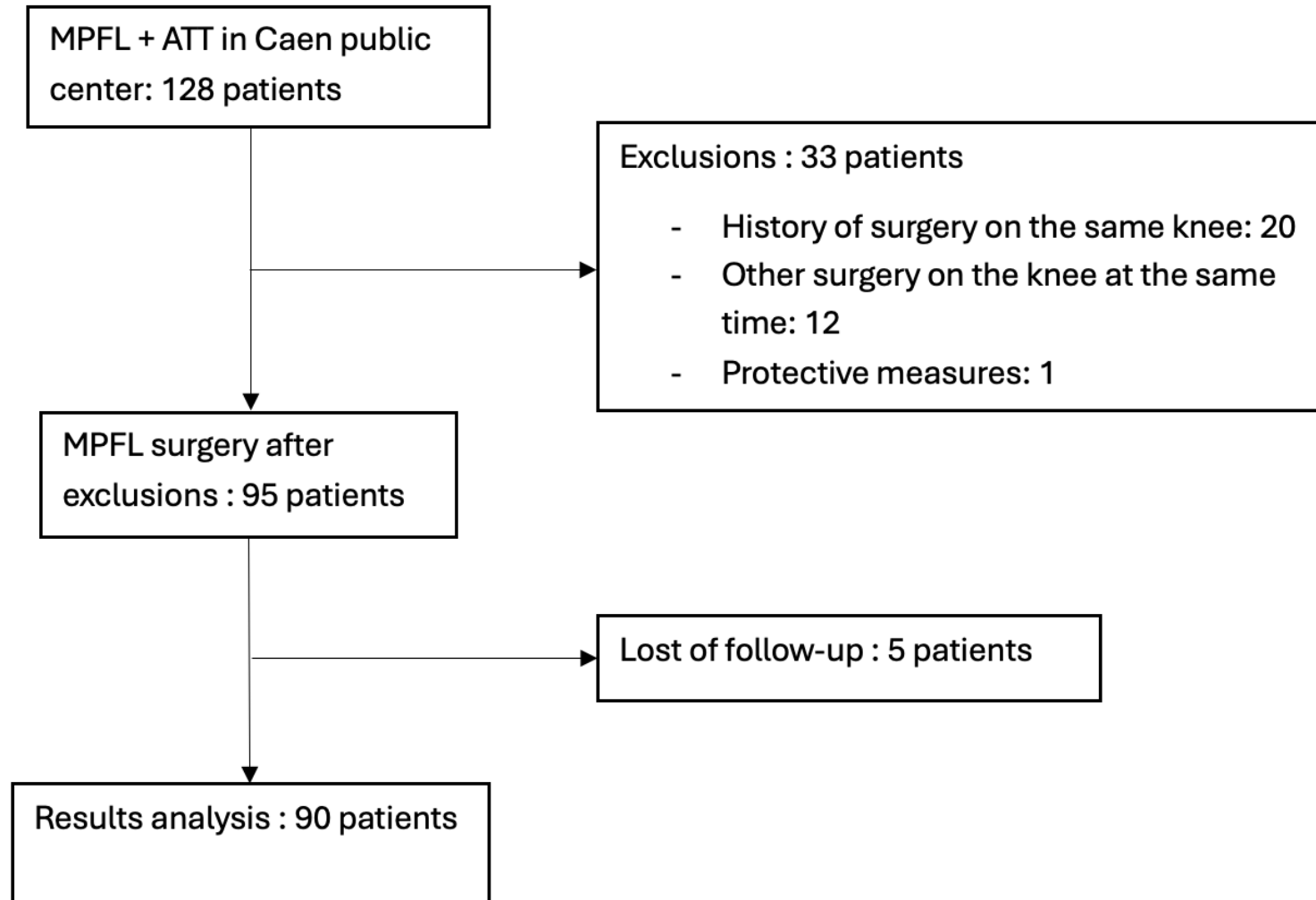
MPFL plasties according to the bone fixation technique : Validated technique but associated with complications

Alternative : Soft tissue fixation technique

Study on the risk of failure : Recurrence of dislocation or residual instability



Materiel & Methods

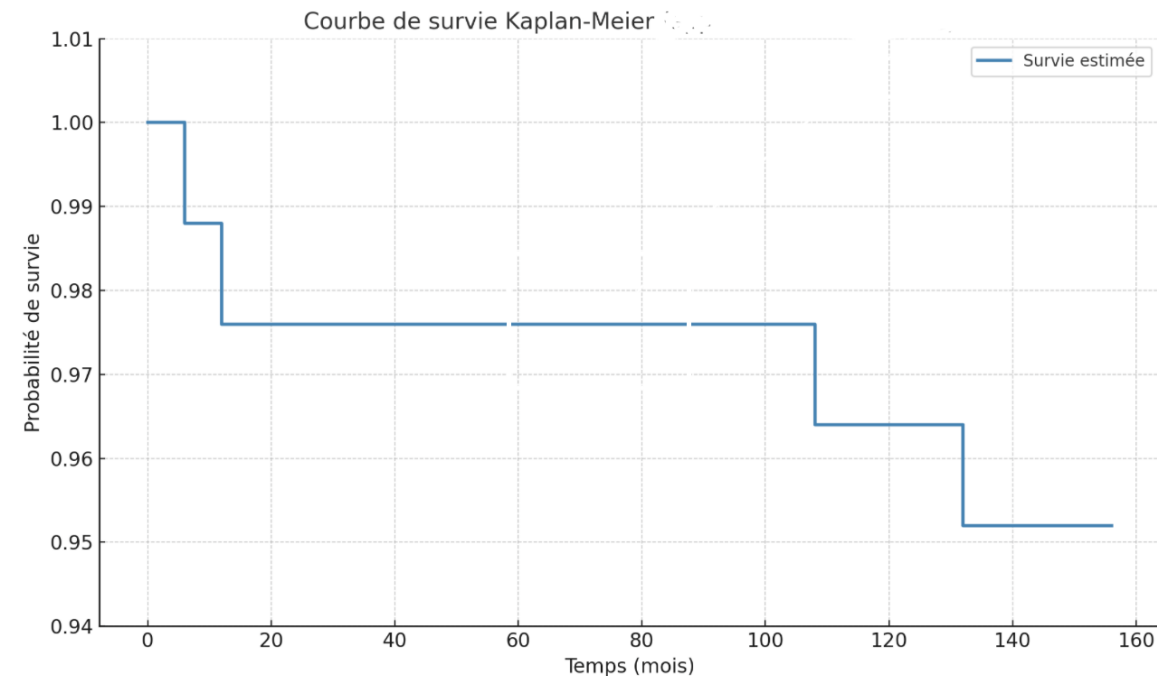




Results

- Before the operation :
 - 96,7% Smillie+
 - 65,6% J-sign+
 - Average CD 1,26 : 76,7% patella alta
 - Average TT-TG 16mm / 25,5% TT-TG increased
 - 75,6% had a trochlear dysplasia (A 51,5%, B 32,3%, C 10,3%, D 5,9%) and 11,1% had a patellar dysplasia
- After the operation :
 - 3,33% Smillie+
 - 0% J-sign+
 - Average CD 0,99 / 0% patella alta

Survival at 3 years = 97,8% / Survival at 10 years : 9,7%





Results

- Average Kujala : 95
- Average Lysholm : 94
- Average IKDC : 92
- Average FJS : 96
- 9 complications :
 - 4 infections, 3 tibial fractures
 - 1 ATT pseudarthrosis
 - 1 stiffness

93% return to activities

Average time after surgery = 6,2 months

TEGNER score comparable pre- and post-op :
4.46 vs 4,42 (p=0,84)

4 failures (4,4%) : 2 recurrences of dislocation, 2 residual instabilities



Conclusion

In case of recurrent patellar instability, MPFL reconstruction with soft tissue fixation is a safe and effective procedure with no specific complications. There is a low failure rate when combined with a bony procedure