Preoperative Foot Parameters and the Risk of Noncontact Secondary Injury After ACL Reconstruction in Teenage Athletes

Yuko Takeuchi, Hideki Hiraiwa, Ryosuke Kawai, Takashi Tsukahara Department of Orthopedic Surgery, Asahi University Hospital, Japan



The 15th Biennial ISAKOS Congress

COI Disclosure Information

Presenter: Yuko Takeuchi

I have no financial relationships to disclose.



Background

Flatfoot has been previously associated with primary ACL injury risk.

Allen MK. Journal of athletic Training. 2000.

 Teenage athletes are at high risk for secondary ACL injury following reconstruction.

AJ Wiggins. Am J Sports Med. 2016.

Purpose

• To investigate whether preoperative flatfoot-related parameters are associated with the risk of noncontact secondary injury after ACL reconstruction (ACLR) in teenage athletes.





Methods Retrospective study

Primary anatomical double-bundle ACLR in teenage patients aged 15 to 19 years between 2016 and 2022 (n = 272)

91 patients excluded with incomplete 24-month follow-up data

13 patients excluded with prior limb operation

; Contralateral ACLR (n = 11), MM suture (n = 1), Exostosis (n = 1)

1 patient excluded with BMI >40

6 patients excluded with preoperative tegner score <7

3 patients excluded without well-positioned foot radiograph

2 patients excluded with tarsal coalition

4 patients excluded with contact ACL secondary injury

152 patients who met the inclusion criteria

Methods

Foot Parameters

measured on weight-bearing lateral radiograph:

- Calcaneal pitch (CP) angle
- Lateral talo-1st metatarsal (LTM) angle
- Cuboid height (CH)





Meary R. Rev Chir Orthop. 1967.

Younger AS. Foot Ankle Int. 2005. 5





Methods

✓ Patients were grouped by whether each parameter was below or above the median.

	Group F	Group C
1 CP angle	Lower	Higher
2 LTM angle	Higher	Lower
③ CH	Lower	Higher





Results

Patients Characteristics			
Age: median (IQR)		16	(16-17)
Sex: n (%)	Male	52	(34.2)
	Female	100	(65.8)
BMI: median (IQR)		21.5	(20.3-23.2)
Tegnar score: n (%)	7	39	(25.7)
	8	17	(11.2)
	9	96	(63.2)
Secondary Injury: n (%)		24	(15.8)
	Ipsilateral	16	(10.5)
ISAKOS CONGRESS 2025 MUNICH GERMANY June 8-11	Contralateral	8	(5.3)

Results

Preoperative foot parameters						
Secondary injury patients						
18.7 (16.9-21.5)						
5.4 (2.4-7.6)						
16.5 (14.6-20.1)						
Secondary injury patients						
17.5 (16.1-21.7)						
5.7 (2.6-8.1)						

(14.0-19.1)

16.5

(14.0-19.4)

16.8



③ CH: median (IQR)



Results

	Group F	Group C	р
	Secondary Injury: n (%)		
Injured-side foot			
① CP angle	12 (16.0)	12 (15.6)	1.00
② LTM angle	13 (16.8)	11 (14.7)	0.82
3 CH	11 (14.5)	13 (17.1)	0.82
Uninjured-side foot			
1 CP angle	17 (22.7)	7 (9.0)	0.03*
② LTM angle	15 (20.0)	9 (11.7)	0.19
③ CH	13 (18.1)	11 (13.8)	0.51





Discussion

In this study

There was a **difference** in median foot parameters between the **injured and uninjured side**.

- Percentage weight-bearing affect to foot parameters in foot radiograph.

 Shelton TJ. Foot & Ankle Specialist. 2018.
- In radiography before primary ACLR, the way to weightbearing may have influenced by injury.

Uninjured-side radiograph may have been more useful for evaluation after ACL injury



Discussion

In this study

Lower CP angle on the uninjured-side showed significant higher risk of noncontact ACL secondary injury.

- Flatfoot landing pattern may associate with a non-contact ACL injury mechanism.

 BP. Boden. Am J Sports Med. 2009.
- Flatfoot may could also be a factor in noncontact secondary injury after primary ACLR.

Flatfoot measured by weight-bearing radiograph on the uninjured-side may be a prediction of noncontact ACL secondary injury.

Conclusion

• A lower preoperative calcaneal pitch angle on the uninjured side was significantly associated with the risk of noncontact secondary ACL injury in teenage athletes.

 Weight-bearing foot radiograph may be useful in preoperative risk assessment.

