

Primary ACL Reconstruction And Conservative MCL Treatment Results In Higher Failure Rates Than Simultaneous Primary ACLR And MCL Reconstruction: A Retrospective Cohort

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Faculty Disclosure Information

Nothing to disclosure.

INTRODUCTION

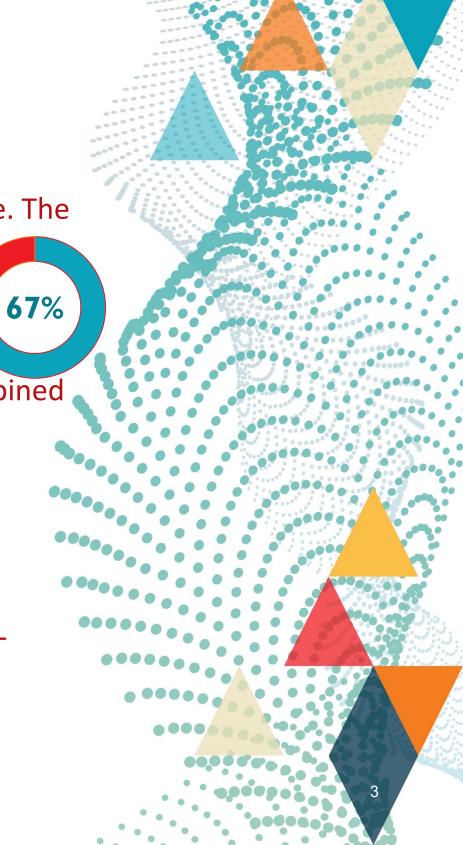
Background

- ACL is the most injured ligament in the knee, while isolated ACL injury is rare. The most common ligamentous knee injury is a combined ACL and MCL injury.
- MCL injuries are seen in up to 67% of patients with ACL injuries.
- Many authors support conservative treatment of MCL tears in cases of combined
 ACL and MCL injury.
- There is controversy regarding the optimal treatment of MCL injuries.

Aim

 We aimed to compare the short-term results of ACLR and conservative MCL treatment with simultaneous ACLR and MCL reconstruction.







METHODS

Study Date

Sep. 2018 >>>>> Aug. 2023

Study Population

II0 patients with ACL and MCL injury

- ACLR & conservative MCL treatment (n = 67)
- ACLR + MCLR (n = 43)





ELIGIBILITY

Inclusion criteria

 $15 \le Age \le 55 \text{ years}$

Combined ACL and MCL injury

Undergoing either primary arthroscopic ACLR or simultaneous ACLR & MCLR

Exclusion criteria

Simultaneous ACLR and ALLR

Previous history of knee surgery

ACL repair

Age < 15 years

Age > 55 years

Revision surgery

Open ligament reconstruction







OUTCOME MEASURES

Age

Sex

• Side

Postoperative ROM

• Lysholm score

Subjective IKDC

ISAKOS

MUNICH GERMANY Pain intensity (VAS)

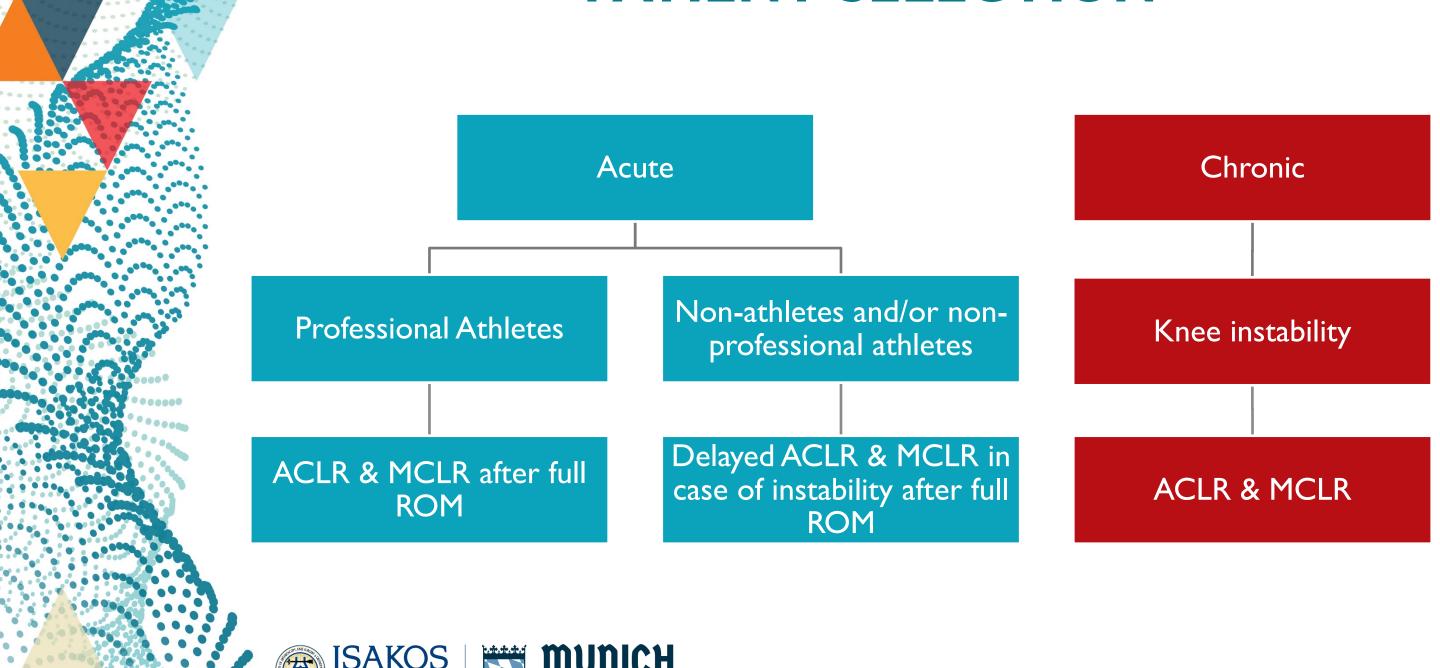
Return to sports

Return to work

Activity level (Marx Activity Scale)

Graft failure

PATIENT SELECTION





DIAGNOSIS









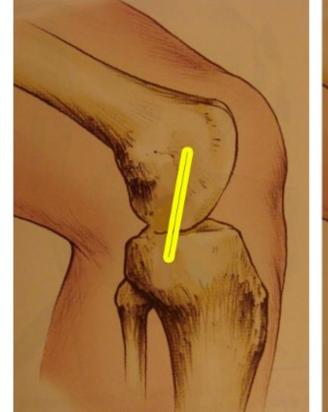


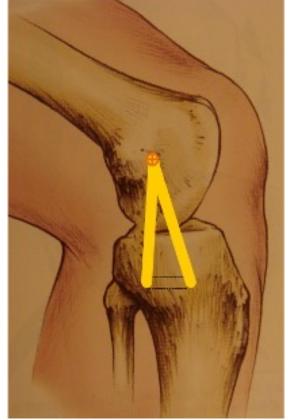
SURGICAL PROCEDURE

• BTB ACLR

ISAKOS

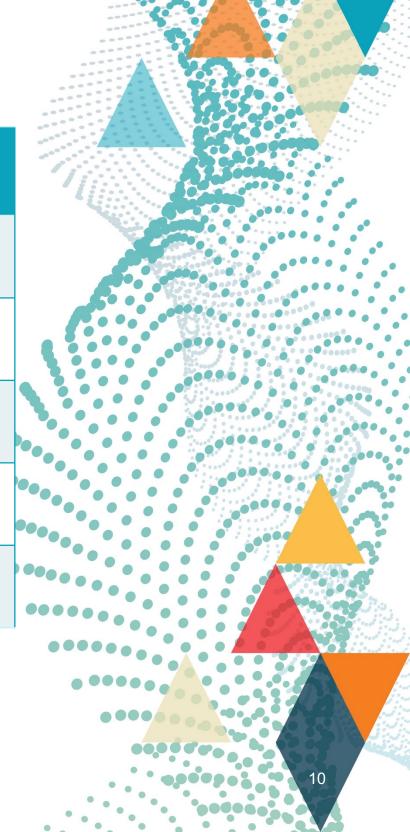
- Tibialis posterior allograft MCL and/or POL reconstruction
- Meniscus surgery (if needed)





RESULTS

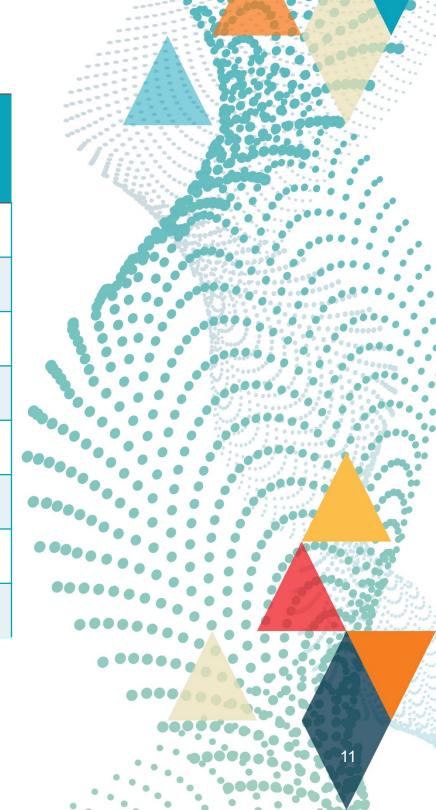
Variable	ACLR (n = 67)	ACLR + MCLR (n = 43)	Р
Age (yrs)	26.68 ± 8.50	28.89 ± 9.88	0.216
Sex (M/F)	59/8	33/10	0.118
Side (Rt/Lt)	39/28	22/21	0.468
MCL laxity grade (1/2/3+)	21/42/4	5/29/9	0.009
Follow-up (months)	28.19 ± 16.68	28.06 ± 7.42	0.958





RESULTS

Variable	Group		
	ACLR	ACLR + MCLR	Р
Post-Op extension (°)	0.12 ± 0.71	0.16 ± 0.65	0.740
Post-Op flexion (°)	129.77 ± 14.39	132.73 ± 5.31	0.132
VAS	0.85 ± 1.13	1.00 ± 1.31	0.654
Tegner-Lysholm score	95.12 ± 5.43	95.64 ± 4.01	0.696
IKDC score	77.64 ± 8.98	80.59 ± 8.65	0.212
Marx activity scale	11.33 ± 5.58	10.59 ± 6.03	0.625
Return to sports (months)	8.39 ± 4.09	7.68 ± 2.32	0.503
Return to work (months)	2.64 ± 1.51	3.38 ± 1.88	0.098







CONCLUSION

No Significant Difference

- Postoperative ROM
 Return to sports
- Functional outcomes
 Return to work

Pain intensity

Activity level





CONCLUSION

Higher graft failure rate following ACLR & conservative MCL

treatment

• The need for surgical management of MCL

REFERENCES

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- Willinger L, Balendra G, Pai V, et al. High incidence of superficial and deep medial collateral ligament injuries in "isolated" anterior cruciate ligament ruptures: a long overlooked injury. *Knee Surg Sports Traumatol Arthrosc.* 2022;30(1):167-175.
- Razi M, Soufali AP, Ziabari EZ, Dadgostar H, Askari A, Arasteh P. Treatment of concomitant ACL and MCL injuries: spontaneous healing of complete ACL and MCL tears. *J Knee Surg*. 2021;34(12):1329-1336.



