ISAKOS

International Society of Arthroscopy, Knee Surgery and Orthopaedic Sports Medicine

9th Biennial ISAKOS Congress • May 12-16, 2013 • Toronto, Canada

Paper #137

Is the Meniscal Healing of Importance on Long-Term Clinical Outcomes or Incidence of Osteoarthritis After Meniscal Repair?

Nicolas Pujol, MD, FRANCE
Nicolas Tardy, MD, FRANCE
Philippe Boisrenoult, MD, FRANCE
Philippe Beaufils, MD, FRANCE

A. Mignot Hospital
Le Chesnay, FRANCE

Summary:
In this long-term outcomes prospective study, arthroscopic meniscal repair yields favorable functional results with a low rate of osteoarthritis. The repaired meniscus, whatever its healing may maintain its biomechanical function. There are no decreasing outcomes with time, despite numerous abnormal MRI signals at 10 years.

Abstract:
Background:
The mean reported healing after meniscal repair is 60% of complete healing, 25% of partial healing, 15% of failure. Partially or incompletely healed menisci are often asymptomatic at short-term.
Is the function of a partially or incompletely healed meniscus disturbed at long-term?

Purpose:
To assess the long-term outcomes of meniscal repairs according to the initial rate of healing.

Material and method:
41 consecutive meniscal repairs were performed between 2002 and 2003. The mean age at the time of surgery was 26 +/- 11 years. When present, all ACL lesions underwent reconstruction (61.3% of cases). According to Henning's criteria by Arthro-CT at 6 months, 20 cases healed completely, 7 partially healed and 4 cases healed incompletely.

Results:
At a mean follow-up of 112+/-10 months, 31 patients were prospectively followed for a clinical and Imaging assessment (X-rays, MRI). 4 patients underwend a secondary meniscectomy (12.9%). Objective results were good in 92% of cases (17 IKDC A, 8 B, 2 C). The mean KOOS distribution was as follows : pain 94.3+/-9, Symptoms 90.9+/-15, Daily living 98.7+/-2, Sports actvities 91.1+/-14, Quality of life 91.5+/-15. 23 of the patients had no difference in the Grade of osteoarthritis between the injured and the non-injured knee, 6 patients had a Grade 1 osteoarthritis, 2 a Grade 2. At MRI, abnormal signals were present in 77.7% of cases (9 Horizontal cleavages, 7 vertical signals, 5 complex signals). The subjective outcomes did not decreased with time (p=0.55).
There were no differences between lateral and medial menisci, stable or stabilized knees (p=0.5). The initial meniscal healing rate did not significantly influence clinical nor Imaging outcomes (p=0.7).

Conclusion:
Arthroscopic meniscal repair yields favorable functional results with a low rate of osteoarthritis. The repaired meniscus, whatever its healing may maintain its biomechanical function. There are no decreasing outcomes with time, despite numerous abnormal MRI signals at 10 years.