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Second-Look Arthroscopic Findings After Open Wedging High Tibia Osteotomy Focusing on the Posterior Root Tears of the Medial Meniscus

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Summary:
Our study demonstrated a high rate of healing of RTMMP after HTO without attempted repair.

Abstract:
Purpose:
This study examined the results of open wedge High tibial osteotomy (HTO) focusing on root tear of the medial meniscus posterior horn (RTMMP) by second-look arthroscopy.

Methods:
Among 31 consecutive patients, who underwent HTO without a meniscectomy or pullout repair about RTMMP, 20 patients were available for second-look arthroscopic evaluation. All patients were medial unicompartmental arthritis. The healing status of the RTMMP was classified as complete, incomplete and no healing. The difference in the weight bearing line between pre-operation and at the last follow up was evaluated. Osteoarthritis and chondral lesion were evaluated and the clinical results were also evaluated. The correlation between healing status and other variables (weight bearing line, cartilage status, and clinical scores) were evaluated. We also compared other variables between healed (10 patients) and non-healed (incomplete 7 + no healing 3 patients) groups.

Results:
There were 10 (50 %) cases with complete haling, 6 (30 %) with incomplete healing, 4 (20 %) with no healing. The Kellgren-Lawrence grade was not improved with the standing plain radiograph (P=.09), but no progression of the chondral lesion was observed in second-look arthroscopy; some improvement was even observed (P=.002). The mean median
Lysholm score improved from 58 preoperatively to 88.5.0 at the last follow-up. The median Hospital for Special Surgery (HSS) score also increased significantly from 62.4 (range, 50 to 76) to 87.2 (range, 80 to 92; P = .003). The comparison between healed and non-healed group showed no statistical differences in all variables.

Conclusion:
Our study demonstrated a high rate of healing of RTMMP after HTO without attempted repair. However, the healing was not strongly associated with other variables.