

Comparison of Early Versus Delayed Weightbearing Outcomes After Microfracture for Small to Midsized Osteochondral Lesions of the Talus

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Summary:

Two postoperative treatments differing by early and delayed weightbearing status after arthroscopic microfracture for small to mid-sized osteochondral lesions of the talus showed good clinical results and similar outcomes

Abstract:

Summary:

No comparative clinical study has been performed on early and delayed weightbearing after microfracture for osteochondral lesions of the talus. The purpose of this prospective study was to compare the clinical results of early and delayed weightbearing after microfracture of small to mid-sized osteochondral lesions of the talus. Two postoperative treatments differing by weightbearing status after arthroscopic microfracture showed good clinical results and similar outcomes. The study shows that early weightbearing postoperative regimens can be recommended for patients treated by microfracture for osteochondral lesions of the talus.

Introduction:

The initiation of weightbearing is the focus of postoperative treatment after microfracture for osteochondral lesions of the talus. However, no comparative clinical study has been performed on early and delayed weightbearing after microfracture for osteochondral lesions of the talus. The aim of this prospective study was to compare the clinical results of early and delayed weightbearing after microfracture of small to mid-sized osteochondral lesions of the talus.

Methods:

Eighty-one ankles in 81 patients with a single osteochondral lesion of the talus that had been treated by arthroscopic microfracture constituted the study cohort. Ankles were allocated to either a delayed weightbearing (DWB) group (41 ankles) or an early weightbearing (EWB) group (40 ankles). These 2 groups were comparable with regard to preoperative data. Postoperatively, patients in the DWB group maintained nonweightbearing for 6 weeks, but the EWB group was allowed early weightbearing (as tolerated) at 2 weeks. American Orthopaedic Foot and Ankle Society (AOFAS) ankle-hindfoot scale score, visual analog scale (VAS) score for pain, and ankle activity score (AAS) were used to evaluate clinical outcomes, and the overall mean follow-up duration was 37 months (range, 24-76 months).

Results:

Mean AOFAS ankle-hindfoot scores were 64.9 points in the DWB group and 66.5 points in the EWB group preoperatively, and these improved to 89.5 and 89.3 at the final follow-up visits, respectively. Mean VAS scores were 7.3 points in the DWB group and 7.4 points in the EWB group preoperatively and 1.9 and 1.8 at final follow-up, respectively. Mean AAS in the DWB and EWB groups improved from 3.0 and 3.0 preoperatively to 6.0 and 6.0 at final follow-up, respectively. No significant differences were found between the 2 groups in terms of the AOFAS score, VAS score, and AAS.

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Conclusion:

Two postoperative treatments differing by weightbearing status after arthroscopic microfracture for small to mid-sized osteochondral lesions of the talus showed good clinical results and similar outcomes in terms of the AOFAS score, VAS score, and AAS. The study shows that early weightbearing postoperative regimens can be recommended for patients treated by microfracture for small to mid-sized osteochondral lesions of the talus.