

# Anterior Cruciate Ligament Reconstruction and Meniscus Repair

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## Introduction

The combination of ACL injuries and meniscal tears is common. Most tears are located in the posterior horns. Partial tears usually heal and operative treatment is therefore not necessary. If the torn fragments can be dislocated into the joint during arthroscopy, then suturing is a valid option. It is the goal of this study to analyse the characteristics of the treatment process in combined ACL reconstructions and meniscus repairs.

## Material and Methods

This is a retrospective cohort study of the author's patients. Inclusion criteria were: simultaneous acl and meniscus repairs. ACL reconstructions were done with a PTB graft in a arthroscopically assisted transcondylar technique or a STG graft in a double or single bundle technique. Meniscal repair was done using the FasT-Fix® system. All patients followed an integrated care pathway.

## Results

Number of patients: 19

Age: 30.52 years (average)

Gender: 8 male, 11 female

Side: 8 right, 11 left

Meniscus rupture: 8 lateral, 15 medial (4 incarcerated)

Repair: 6 lateral, 13 medial

ACL reconstruction: PTB 12, STG 7 (Double bundle 6)

Length of stay: 4.8 days

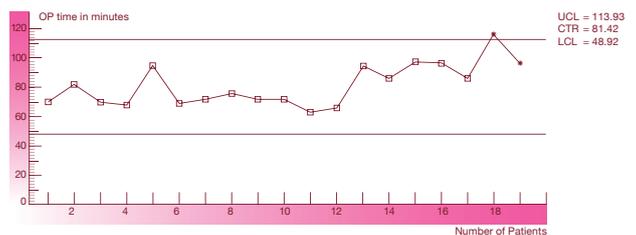
Complications: 1 notchplasty

## Discussion

Integrated care pathways for ACL repair patients need not be modified and also can be applied to this group of patients. STG Grafts in the double bundle technique need longer operation times. No drains and no orthoses (except for one patient) were used. Except for one extension problem there were no complications.

## Take home message

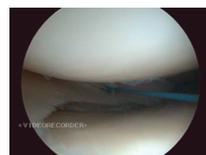
ACL reconstruction and simultaneous repair of meniscal tears is a safe and reliable procedure.



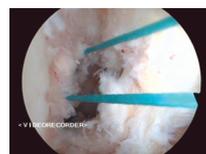
→ HS 2007 Right knee:  
Tear of the lateral meniscal horn.  
Palpation with a hook.



→ HS 2007 Right knee:  
Sutures of the lateral meniscus.



→ HS 2007 Right knee:  
Marked femoral channels for the origin of the ACL (anteromedial and posterolateral bundles)



→ HS 2007 Right knee:  
Double bundle reconstruction of the ACL with STG tendons