Tibial or Femoral Osteotomy in Femoro tibial Osteoarthritis?

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Anatomical criteria
- Stage of Osteo-arthritis
- Analysis of the deformity and its reductibility
- Ligament status
- Range of motion

Clinical conditions
- Age and expectation
- Activity
- Weight
- General medical status (cardiovascular, diabetes, plavi...)
- Infection history

No True Algorithm

<table>
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<tr>
<th>Osteotomy</th>
<th>Clinical criteria</th>
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</thead>
<tbody>
<tr>
<td>Unicompartmental knee arthroplasty</td>
<td>Age and expectation, Activity, Weight, General medical status</td>
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TKA

Duf...bernard 71 y
Selecting the appropriate knee

Anatomical criteria

- Stage of Osteo-arthritis
- Analysis of the deformity and its reductibility
- Ligament status
- Range of motion
Stage of OA

- Osteonecrosis
- Osteoarthritis (IKDC)

| Grade A or B | Grade C or D | Severe OA with cupula |

Analysis of the deformity, its reducibility

- HKA film: mechanical Femoro-Tibial Angle

- OA film: Cartilage wear, mFA, mFTA, mTA

- Extra-articular deformity

- Medial FTA

- Osteotomy corrects extra-articular deformity

Corrective vs « Palliative »

Medial F.T.O.A

Hypercorrection

Corrective

Palliative

Opening vs Closing

Early O.A.

Younger patients

Established O.A.

Patella Infera

Posterior cupula

Opening vs Closing

Femoral or Tibial O.?

P Chambat's Hypothesis, Budapest 1994

Vit...mireille

Distal Femoral Varus O + 10y

Alc...denise
60 Y

Distal Femoral Varus O + 6y
1. Osteotomy
2. No pain (95%), Forgotten knee (80%), Stability (90%), Walking distance (no limit), normal Stairs, no limping, no crutch, no swelling.
3. All sports
4. Complete extension, flexion 145° (preop ROM)
5. Restricting surgery. Weight bearing delayed 2 months, (pre-op rehabilitation), Hospitalisation (5 days), no rehab center, adaptation 3 to 6 months. autonomy and driving

Expected result

Survival rate: 76% at 10 ys
Infection : < 0.5%
60 y, very active Bilat HTO

Femoral versus Tibial

P-Chambat’s hypothesis
Livet sign

Thank you

University of Lyon