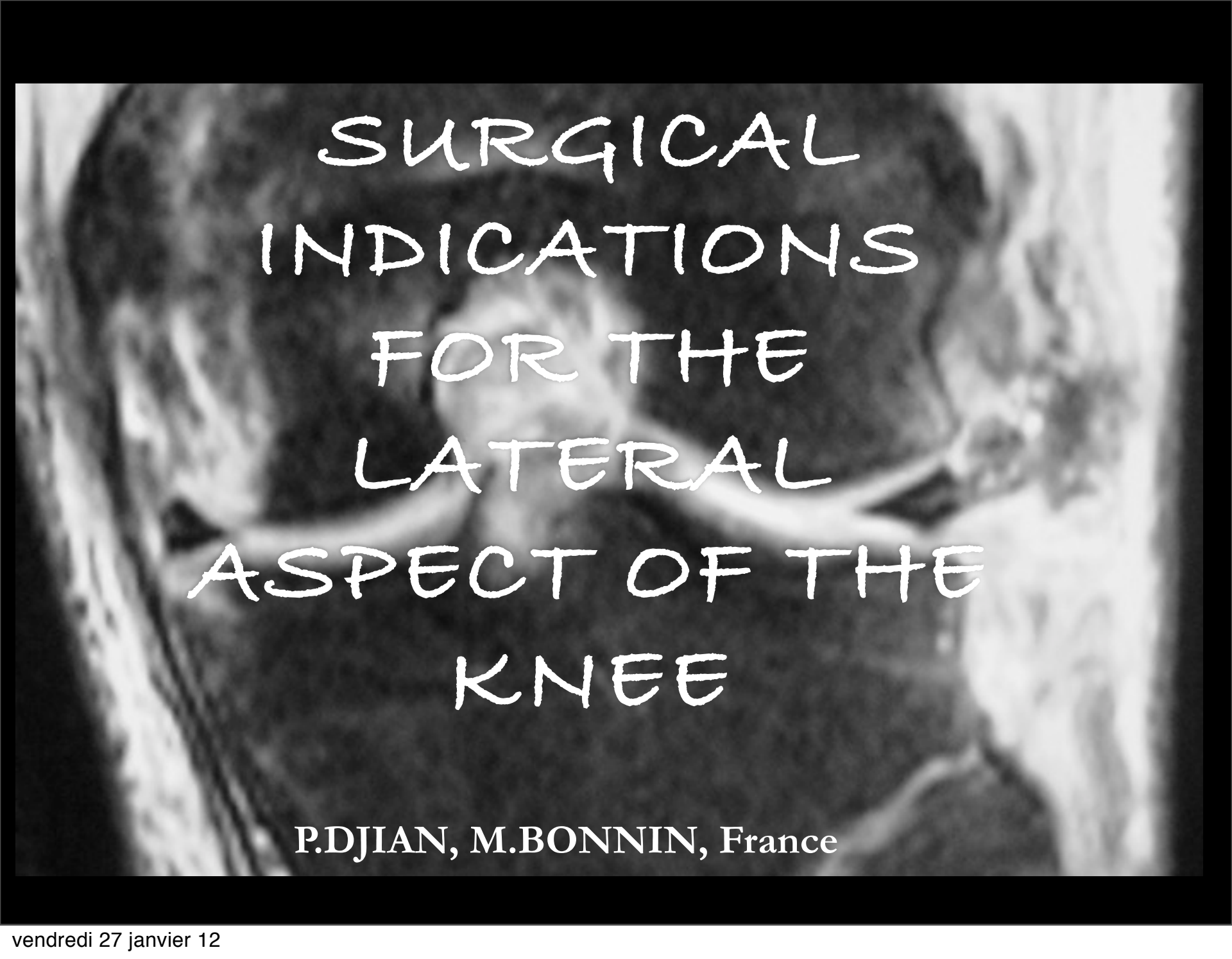


A grayscale lateral MRI scan of a human knee joint, showing the femur, tibia, and surrounding soft tissue structures. The text is overlaid on the image.

SURGICAL INDICATIONS FOR THE LATERAL ASPECT OF THE KNEE

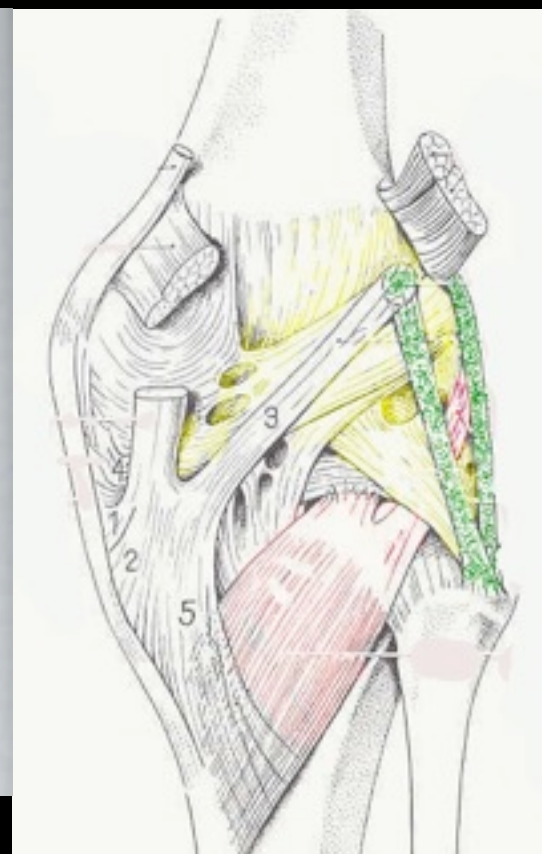
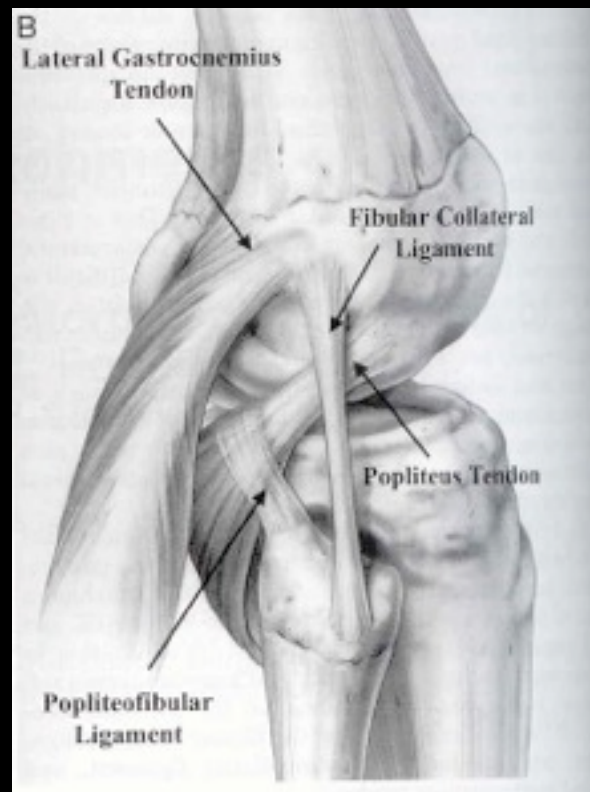
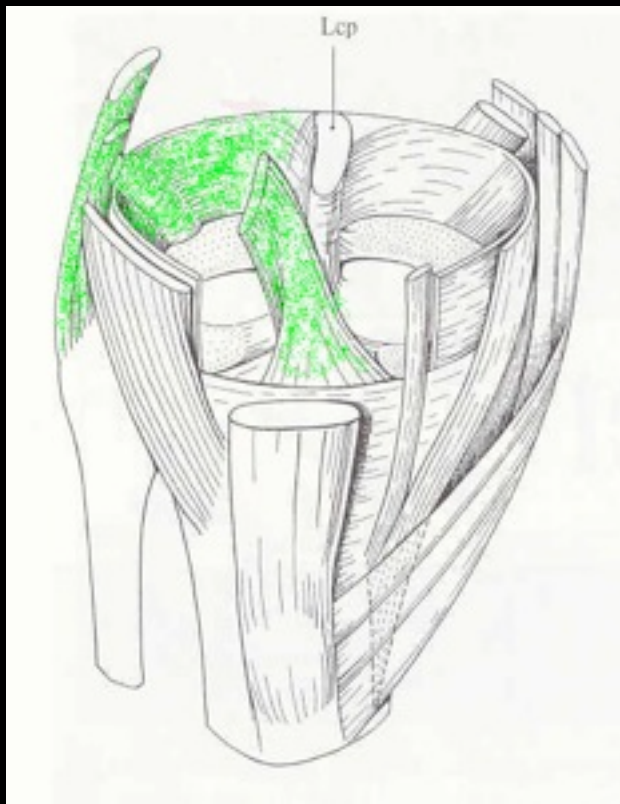
P.DJIAN, M.BONNIN, France

ACL + peripheral tears



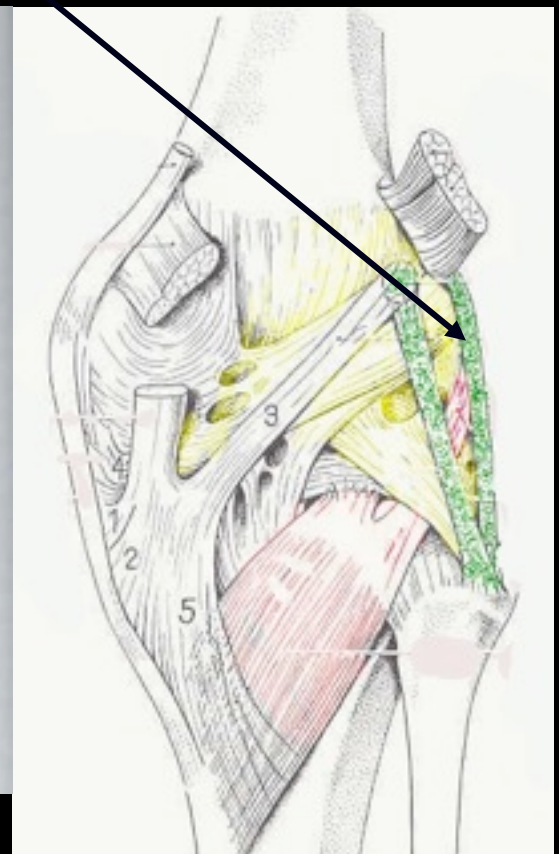
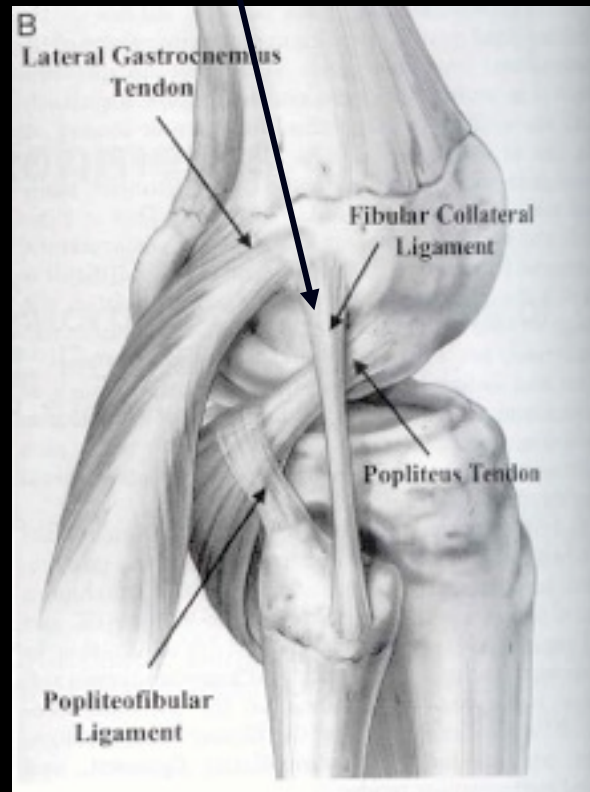
ACL + Postero lateral

ACL + Postero lateral tears

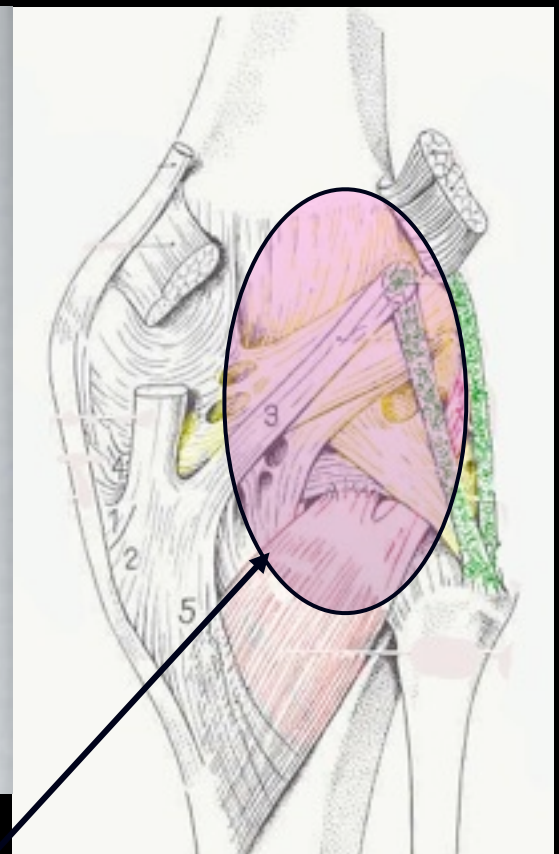
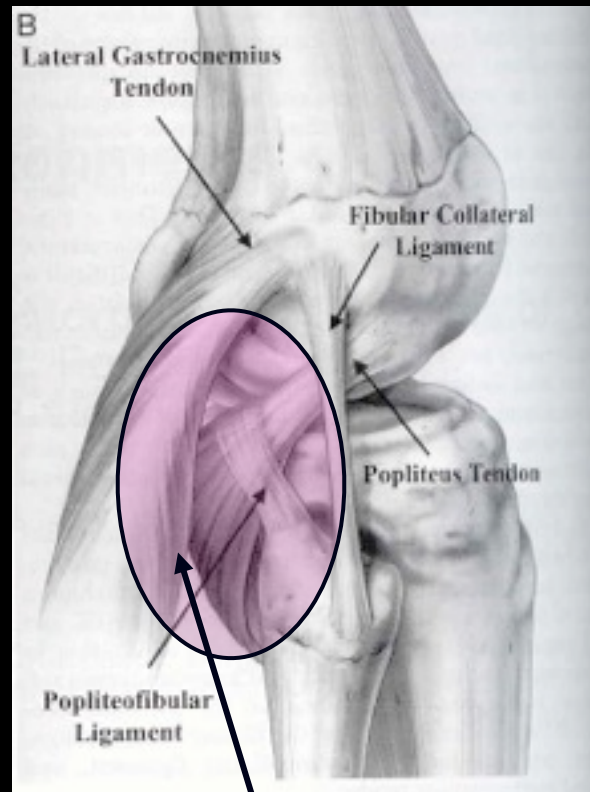
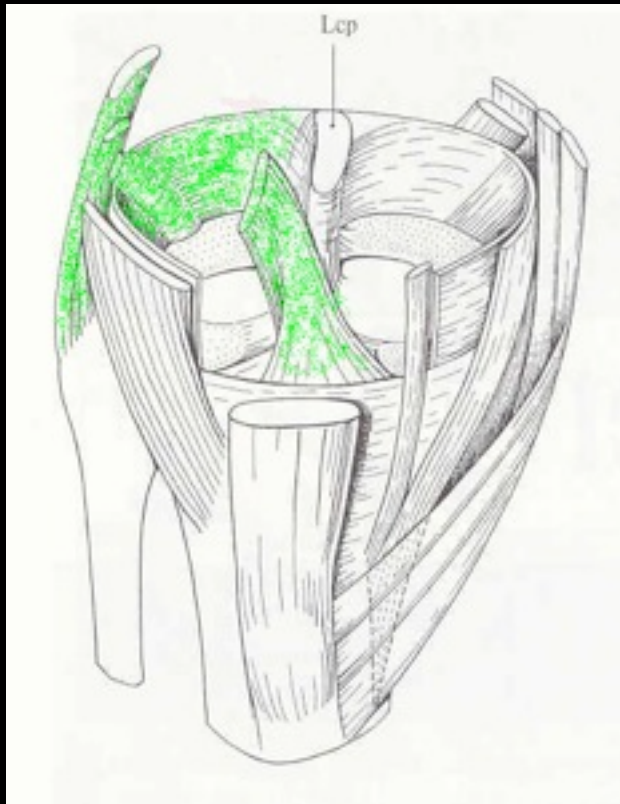


ACL + Postero lateral tears

LATERAL COLLATERAL Lig



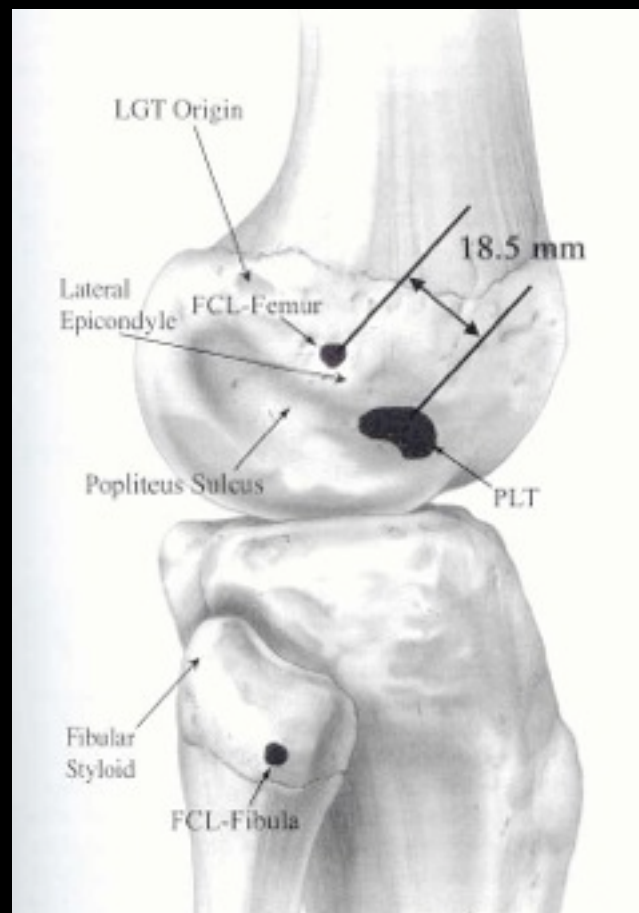
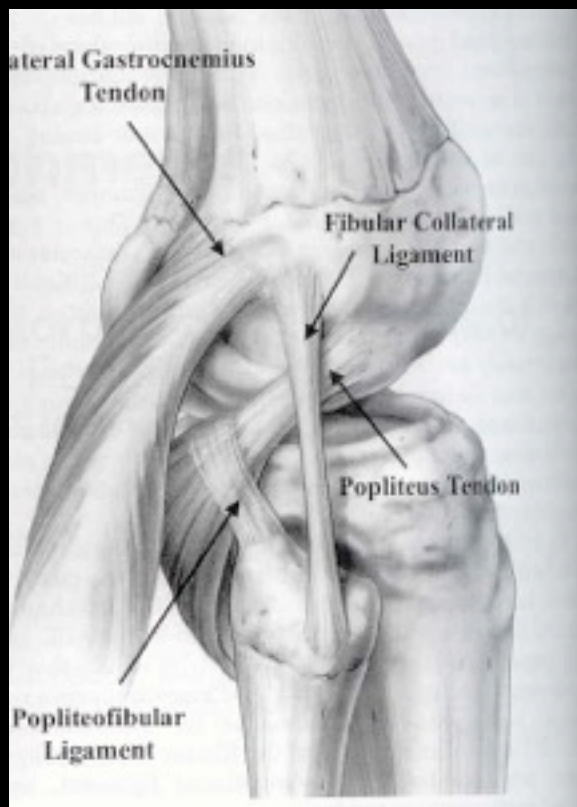
ACL + Postero lateral tears



POSTERO LATERAL CORNER



ACL + Postero lateral tears



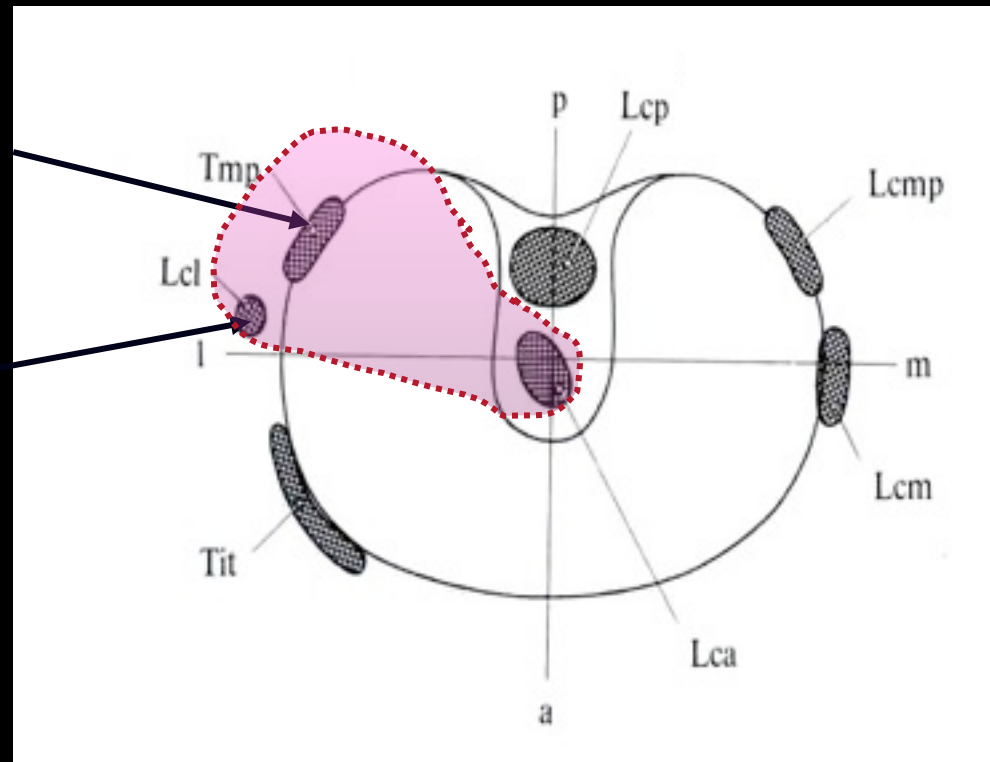
Postero lateral tears: anatomy

LCL ▶ Lateral laxity (coronal plane)

Posterolateral corner ▶ Rotatory laxity (axial plane)

PL corner

LCL



W Muller: Das Knie Springer Verlag 1982

Postero lateral tears : Diagnosis

Testing
Recurvatum test
Reverse pivot shift
Hyper Mobility in ER
Palpation of LCL
Laxity in varus (Clin)
Lateral Lift off (RX)

Hughston JBJS 1985, Noyes AJSM 2000, Bousquet, W Muller

Postero lateral tears : Diagnosis

Testing	LCL
Recurvatum test	-
Reverse pivot shift	$\pm$
Hyper Mobility in ER	-
Palpation of LCL	+
Laxity in varus (Clin)	+
Lateral Lift off (RX)	+

Hughston JBJS 1985, Noyes AJSM 2000, Bousquet, W Muller

Postero lateral tears : Diagnosis

Testing	LCL	PLC
Recurvatum test	-	+
Reverse pivot shift	$\pm$	+
Hyper Mobility in ER	-	+
Palpation of LCL	+	-
Laxity in varus (Clin)	+	-
Lateral Lift off (RX)	+	-

Hughston JBJS 1985, Noyes AJSM 2000, Bousquet, W Muller

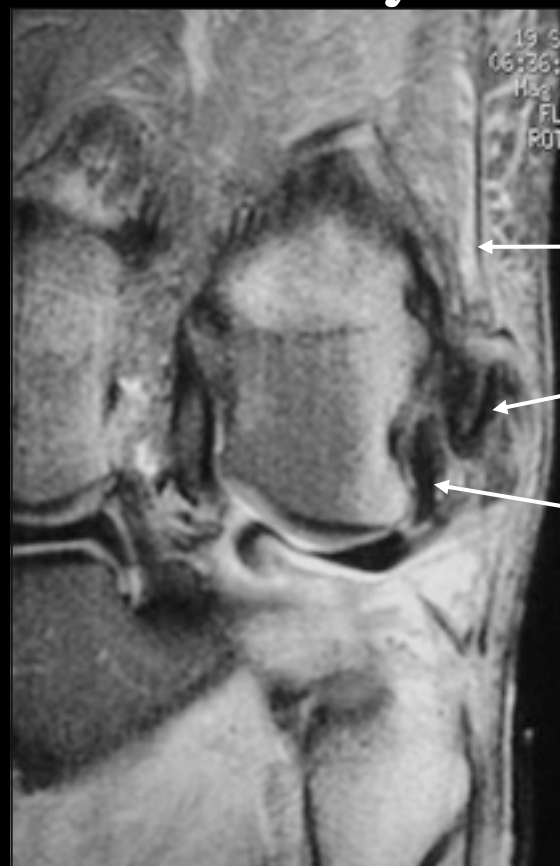


Postero lateral tears: Diagnosis

Dynamic XR



MRI: anatomic
analysis



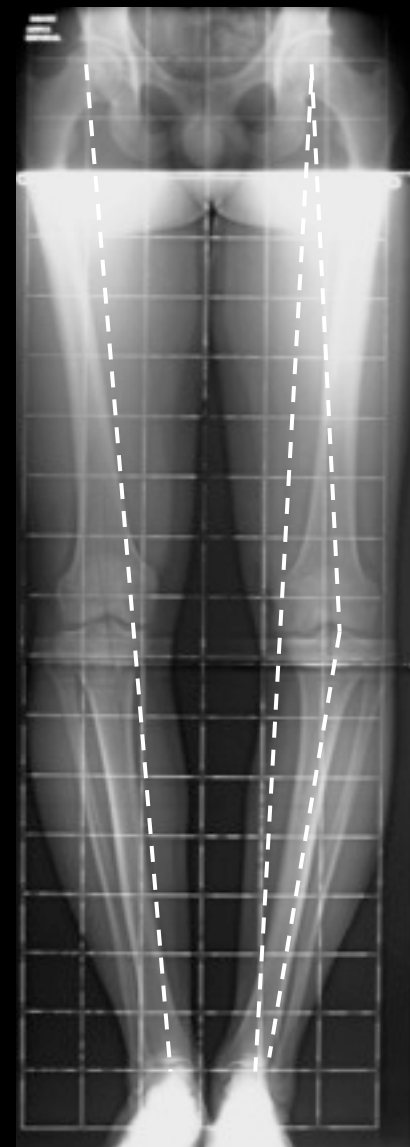
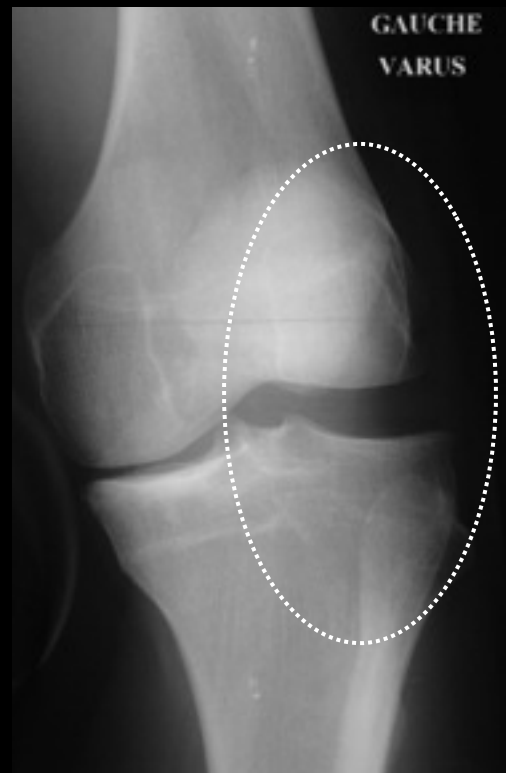
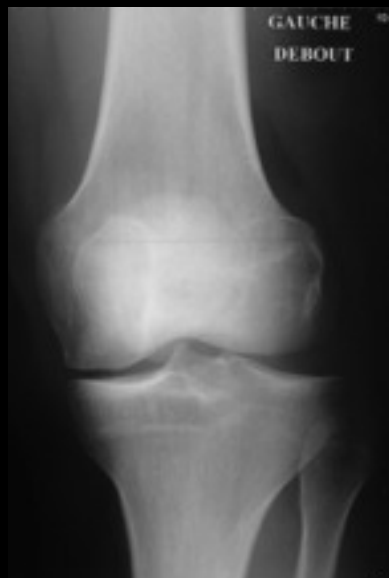
ITB

LCL

Popliteus

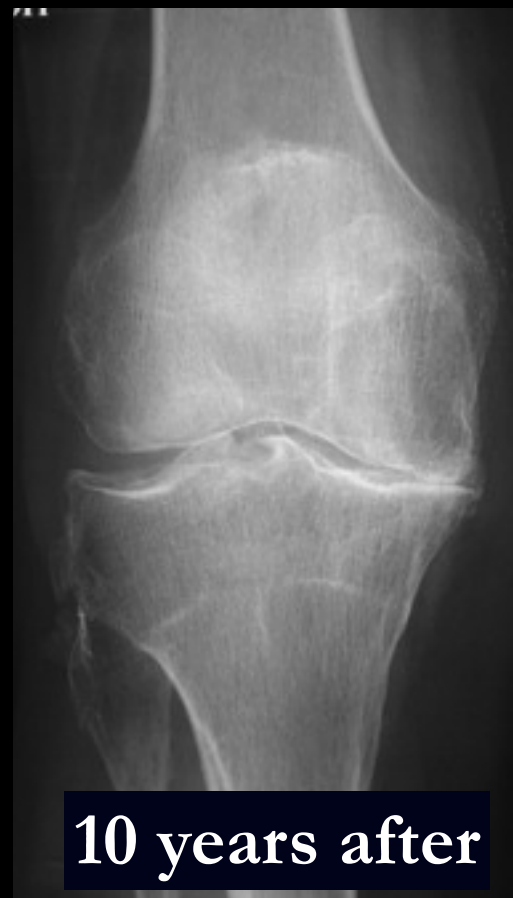


ACL + Lateral & postero lateral associated tears





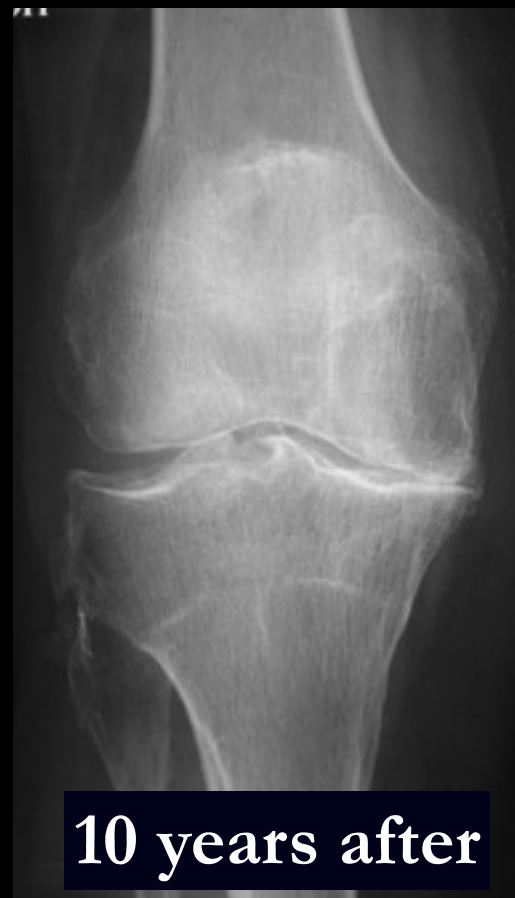
Postero lateral tears: Diagnosis



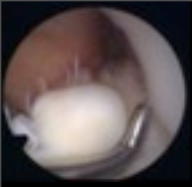
10 years after



Postero lateral tears: Diagnosis



10 years after



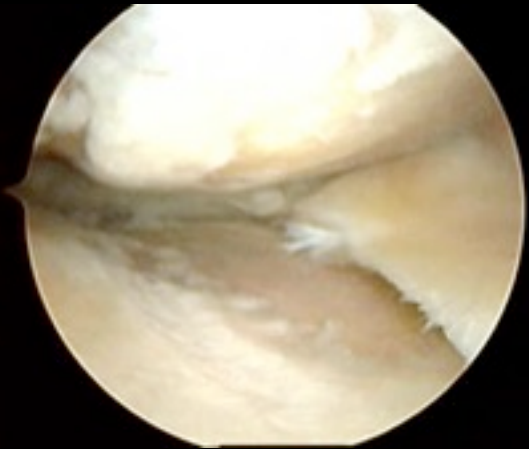
ACL & Varus knee

3 situations

Varus due to
medial cartilage

Varus due to
LCL tear

Varus due to
constitutional alignment



ACL + Postero lateral tears?

Under-estimated

10 à 15% of ACL ruptures



Neglected posterolateral lesions

Gersoff Clin Sport Med 1988

ACL + Posterolateral tears

Residual lateral laxity



Increased forces on the graft



Re-Rupture of the ACL Graft



- ▶ 15% Schepsis (AANA 1995)
- ▶ 24% Noyes (AJSM 1996)

*Hughston CORR 1980, JBJS 1985, Kannus AJSM 1987,
Noyes AJSM 1995, Rubman C Orthop 1999, LaPrade
AJSM 1999*

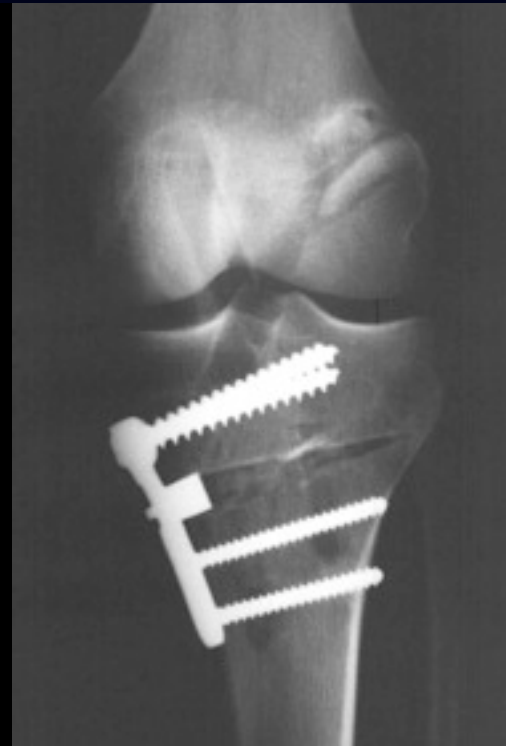
Failure of isolated ACL reconstruction

ACL graft failure



Neglected lateral laxity

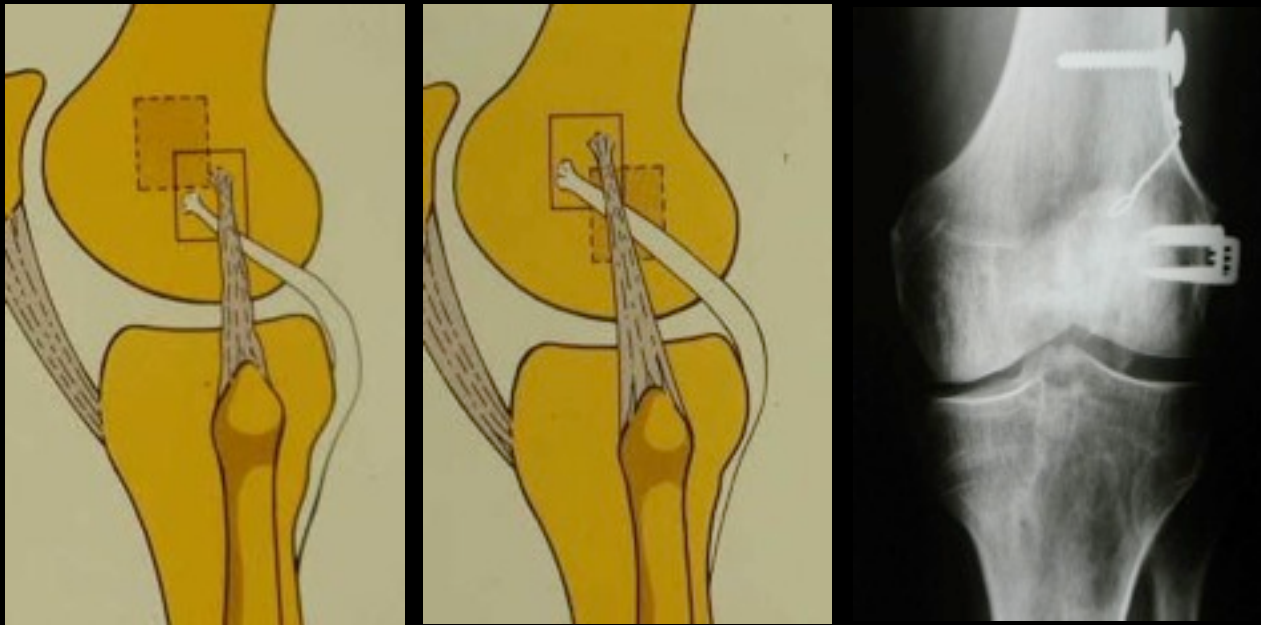
Revision ACL + HTO



Revision: ACL graft+ HTO

Lateral reconstruction: old techniques

- Translation of bone block with LCL & Popliteus
- Anterior and proximal translation



Hughston JBJS 1985

Trillat 1978 in Schultz Springer Verlag



Healing sometimes difficult



Not if damages at mid-substance

Lateral reconstruction: biceps tenodesis

Clancy

In Chapman, Lippincott, 1988



But decrease External rotation++

Lateral reconstruction: biceps tenodesis

Clancy

In Chapman, Lippincott, 1988

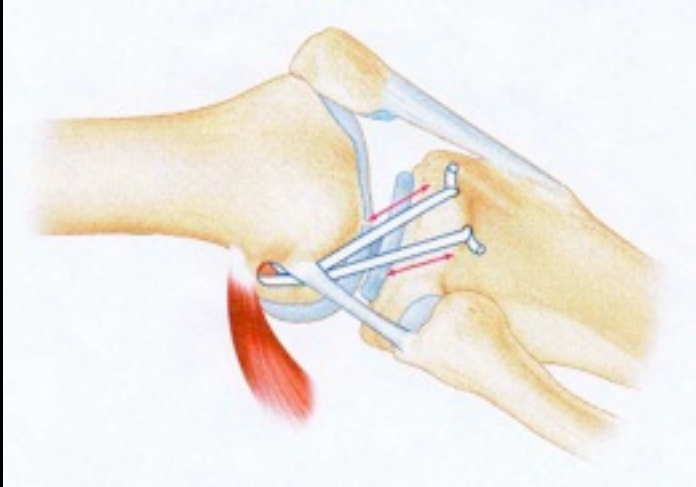


Henry Dejour



But decrease External rotation++

Ilio Tibial Band Transfert ?

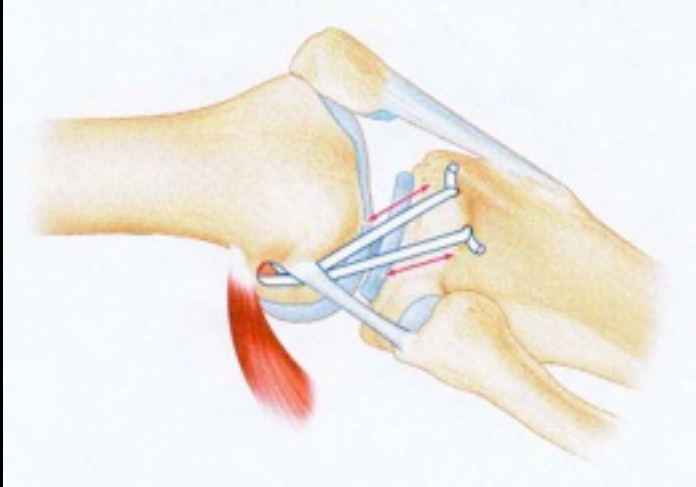


Antero lateral reconstructions
=
plasties « anti-ressaut »

≠ Plasties du LCL or PLC

Loosee, MacIntosh, Lemaire...

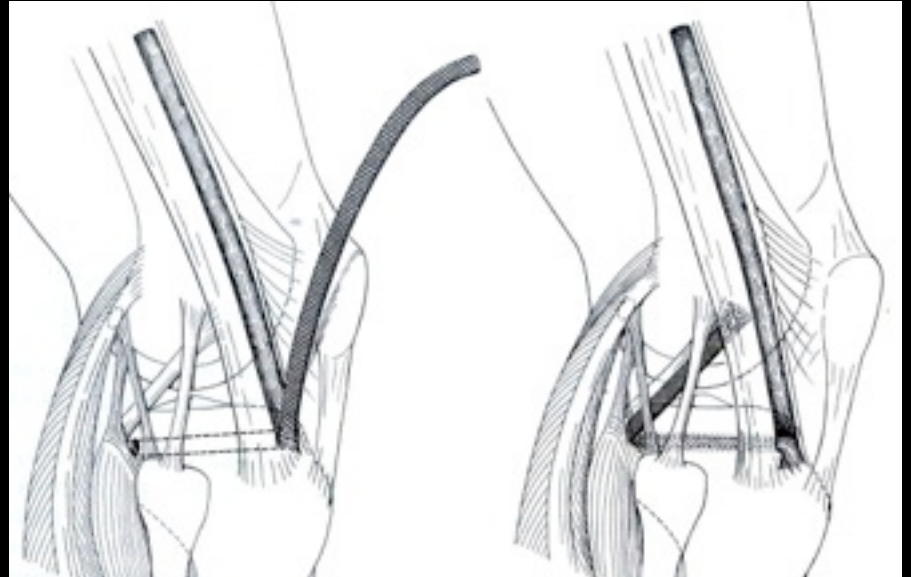
Ilio Tibial Band Transfert ?



Antero lateral reconstructions
=
plasties « anti-ressaut »

≠ Plasties du LCL or PLC

Loosee, MacIntosh, Lemaire...



Popliteal bypass
=
Reconstruction of PLC

≠ Plastie du LCL

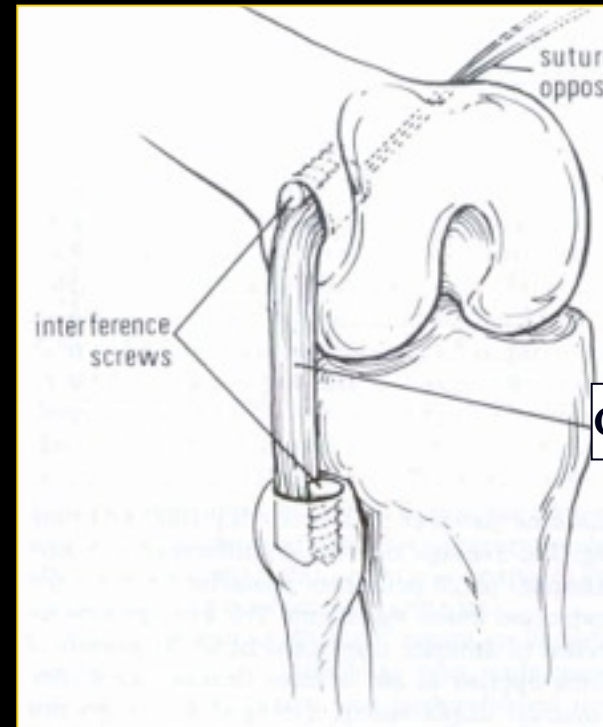
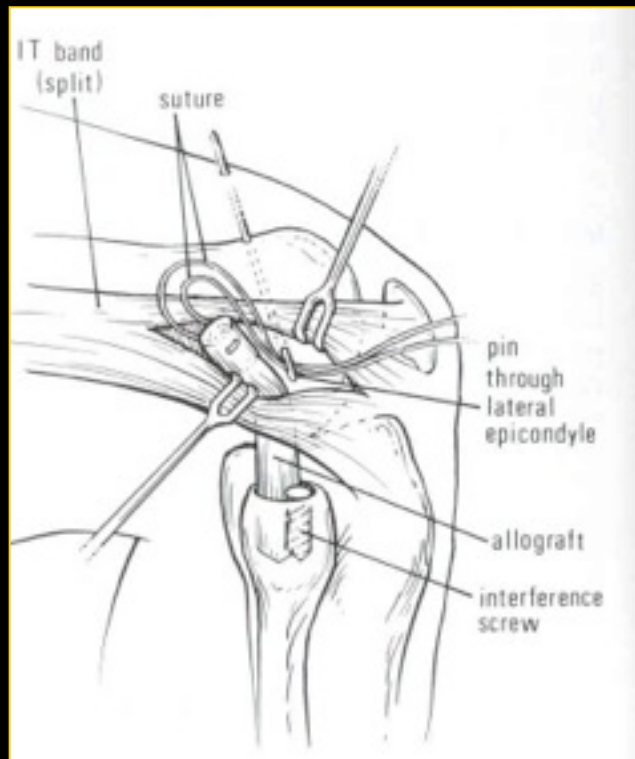
W Muller in Das Knie Springer 1982

Lateral reconstruction: Patellar tendon

Ipsi / Contra / Allograft
7mm width

Noyes Am J Knee Surg 9,1996*
Tibone Am J Sports Med 1998*

**Allograft*

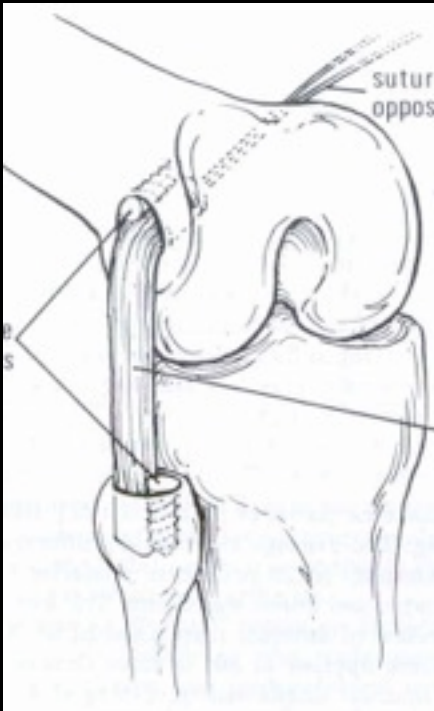


Greffon TR

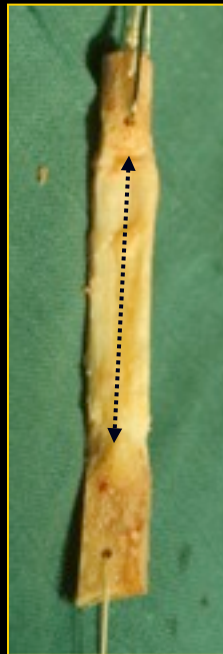
Lateral reconstruction: Patellar Tendon

Checking the length of PT

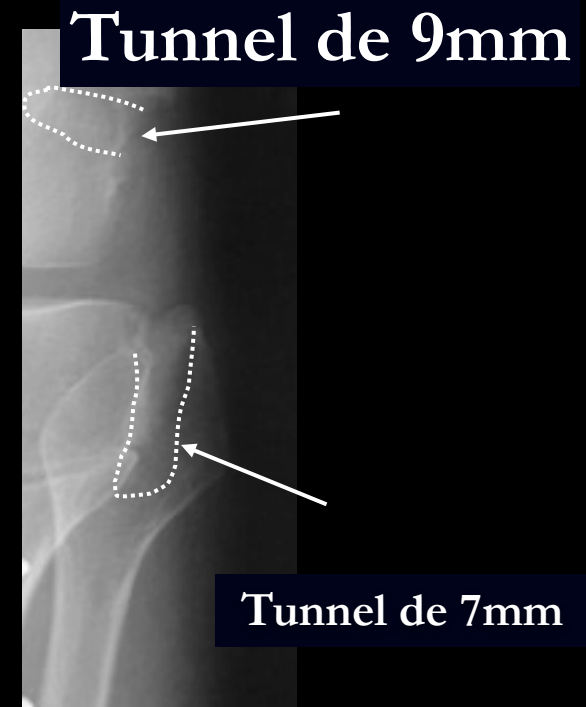
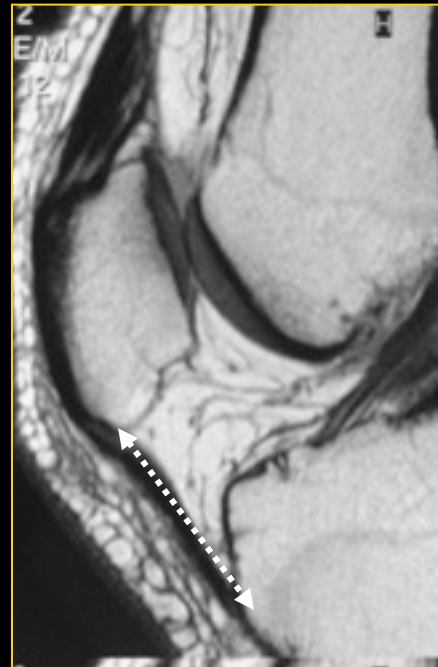
Noyes Am J Knee Surg 9,1996
Tibone Am J Sports Med 1998



LCL : 59 mm *



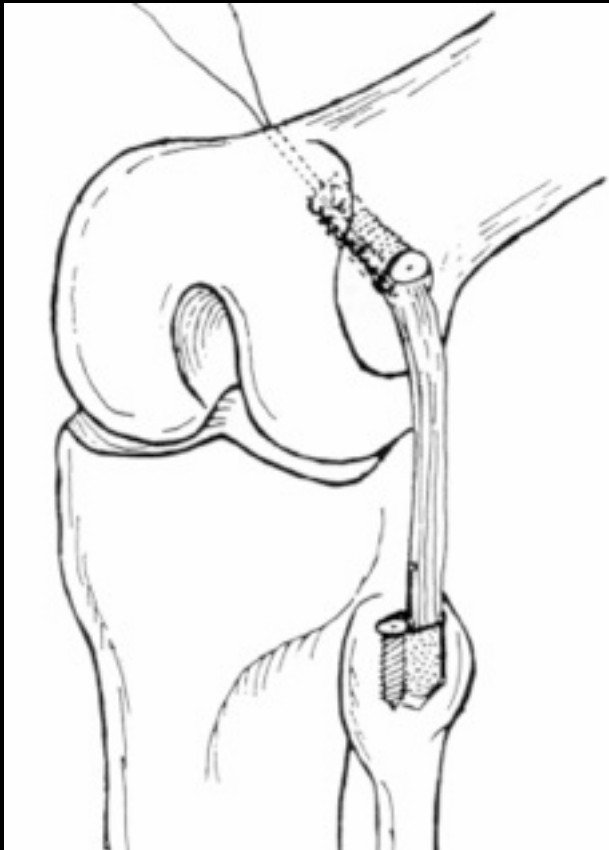
PT : 44-47 mm *



* *Amis AJSM 2001*

Lateral reconstruction: Patellar Tendon

Controlateral Patellar Tendon



Good quality graft



Bone to bone fixation



Interference screws



Minimal approach of the fibula



Efficient for LCL & PLcorner (*Tibone*)



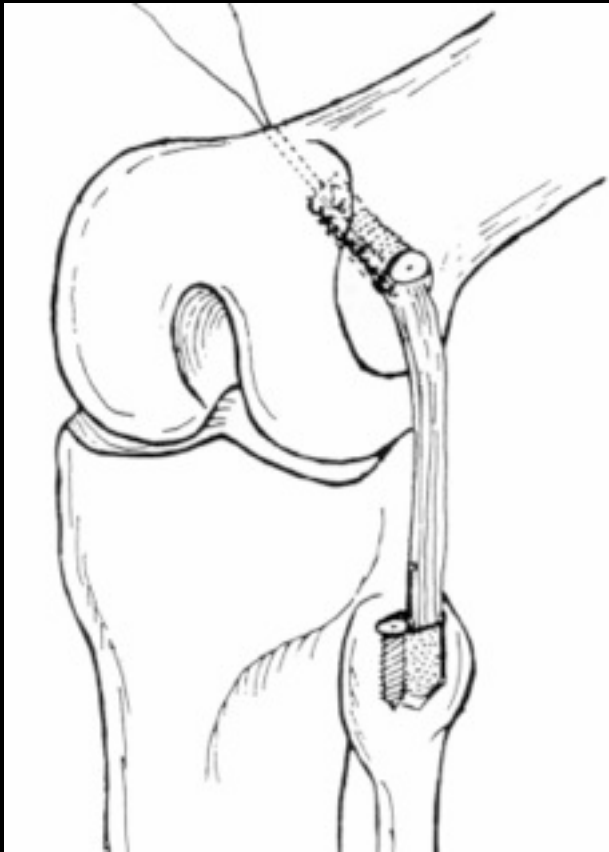
Impossible if Patella baja



Surgery on controlateral knee

Lateral reconstruction:

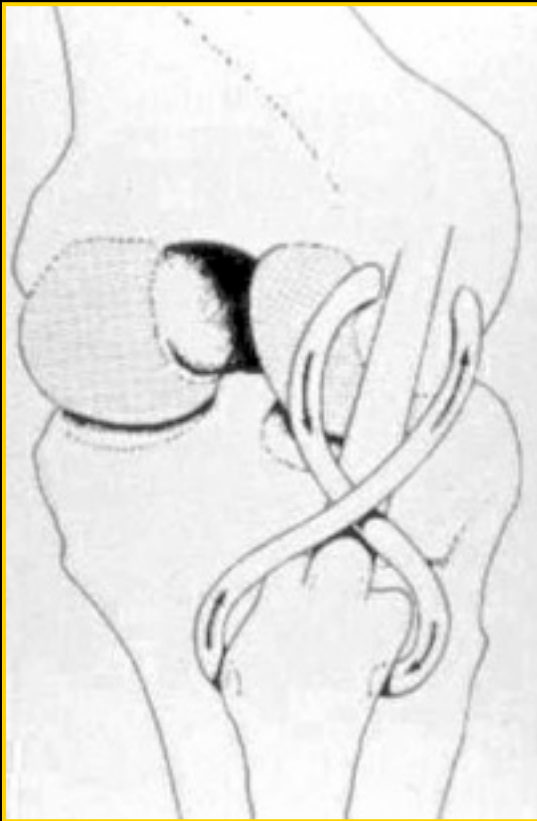
Quadricipital Tendon(Chen Arthroscopy 2001)



- No difficulties with length
- Good mechanical properties
- Bone to bone on fibula
- Same knee

Lateral reconstruction:

Semi ten



- Same knee
- No difficulties with the length

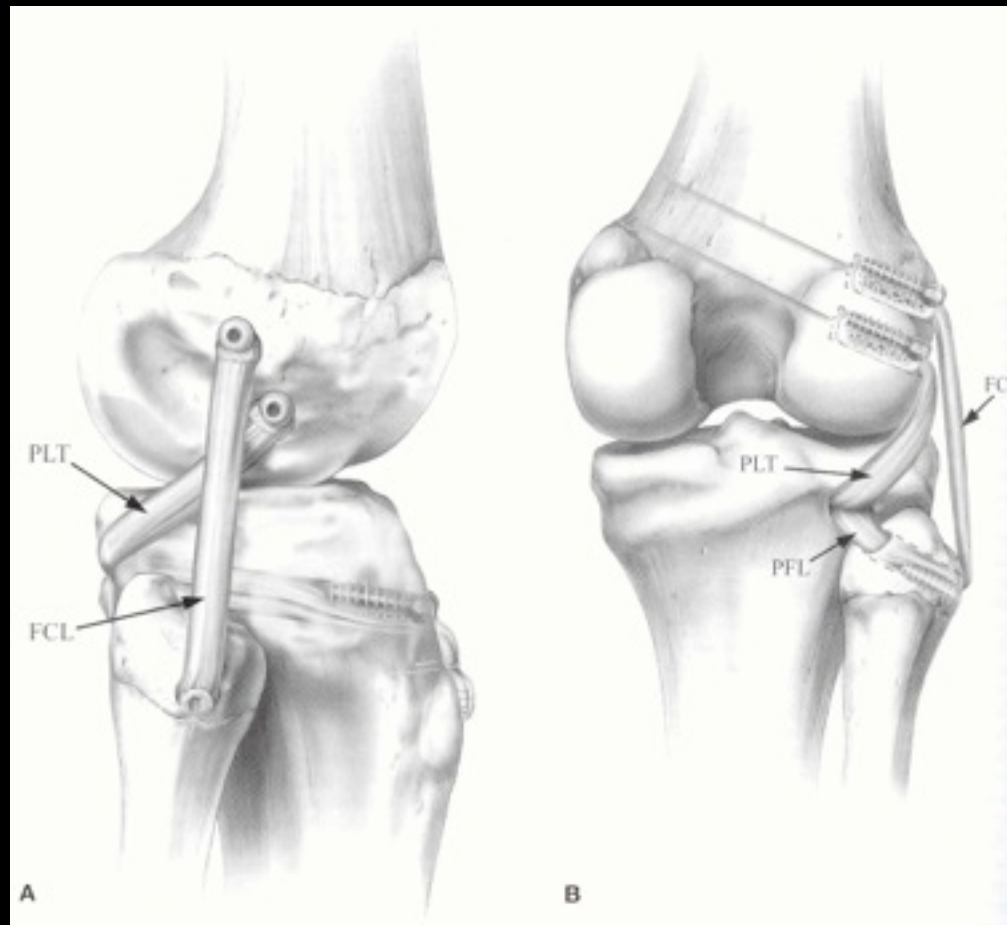
- No bone to bone fixation
- Tunnel on fibular head
- Tensionning more difficult
- Not isometric

Lill: Arthroscopy 2001

Larson: Op Tech in sport med 2001

Lateral reconstruction:

Complex reconstructions LaPrade AJSM 2004



Posterolateral Laxity: Place of HTO

*« HTO is the best LCL reconstruction »
A. Trillat*

Alignement

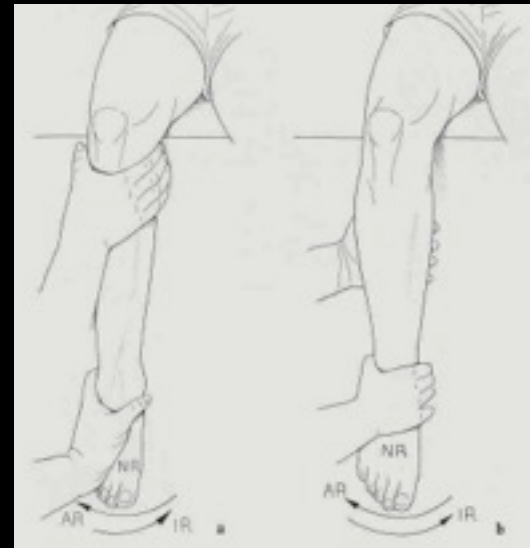


Lift-Off

Monopodal stance



Clinical Exam



LCL ± PLC

Posterolateral Laxity: Place of HTO

ACL + « Posterolateral »

Posterolateral Laxity: Place of HTO

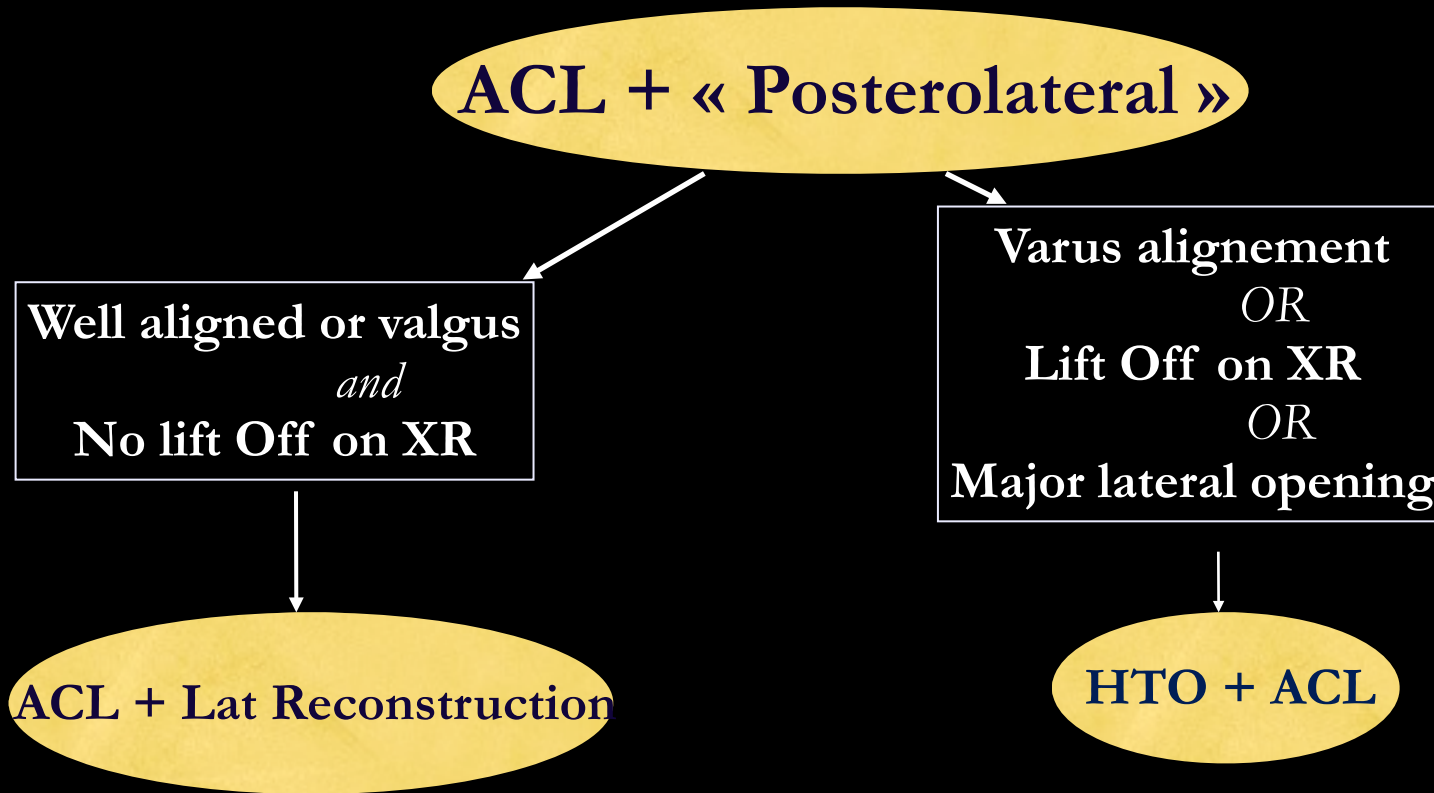
ACL + « Posterolateral »

```
graph TD; A([ACL + « Posterolateral »]) --> B[Well aligned or valgus  
and  
No lift Off on XR]; B --> C([ACL + Lat Reconstruction]);
```

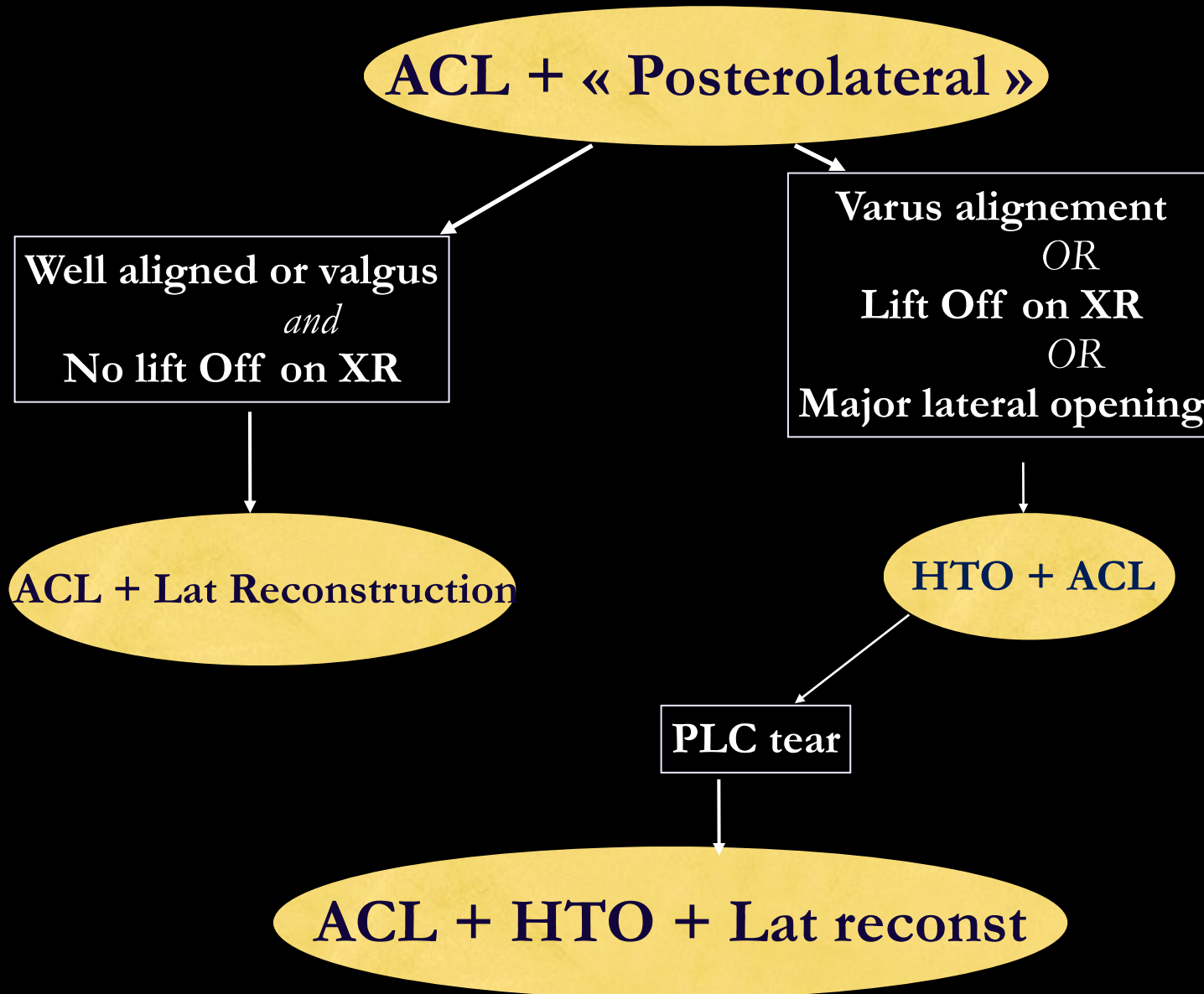
Well aligned or valgus
and
No lift Off on XR

ACL + Lat Reconstruction

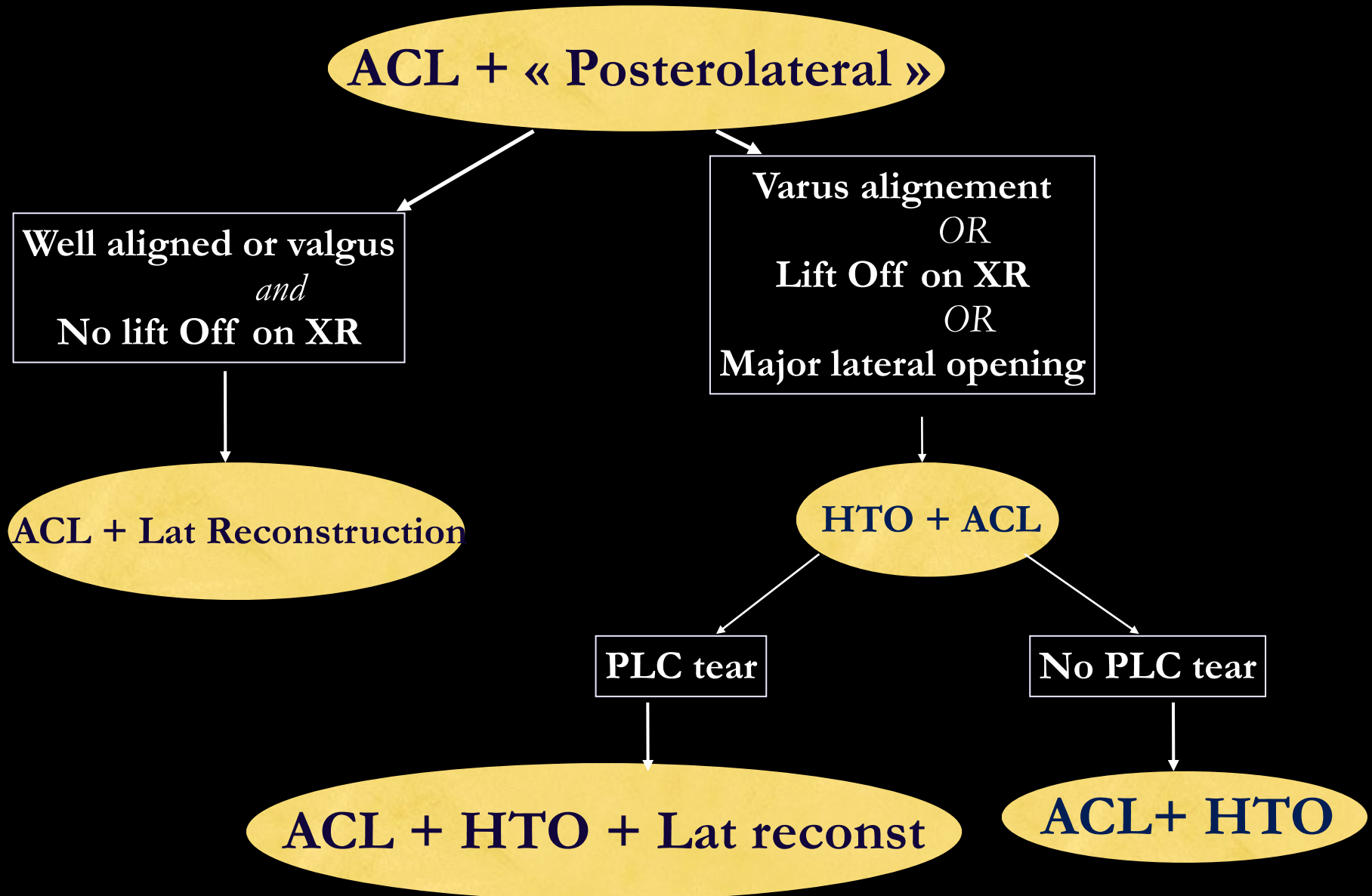
Posterolateral Laxity: Place of HTO



Posterolateral Laxity: Place of HTO



Posterolateral Laxity: Place of HTO

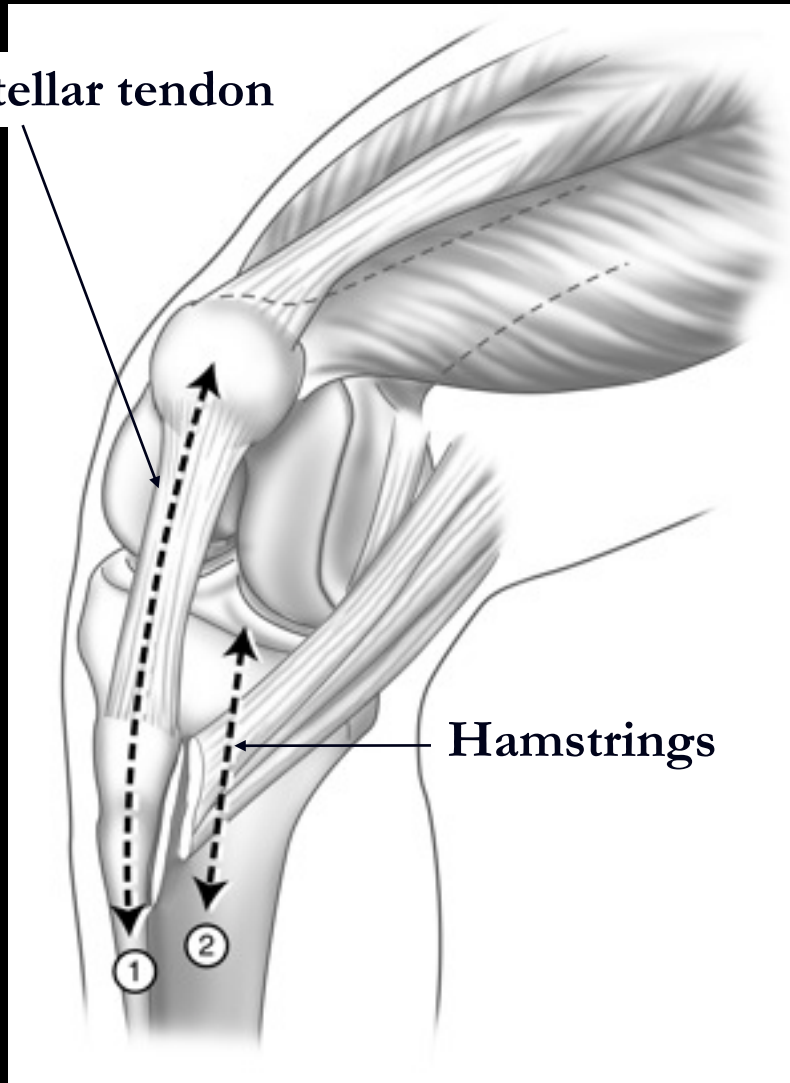




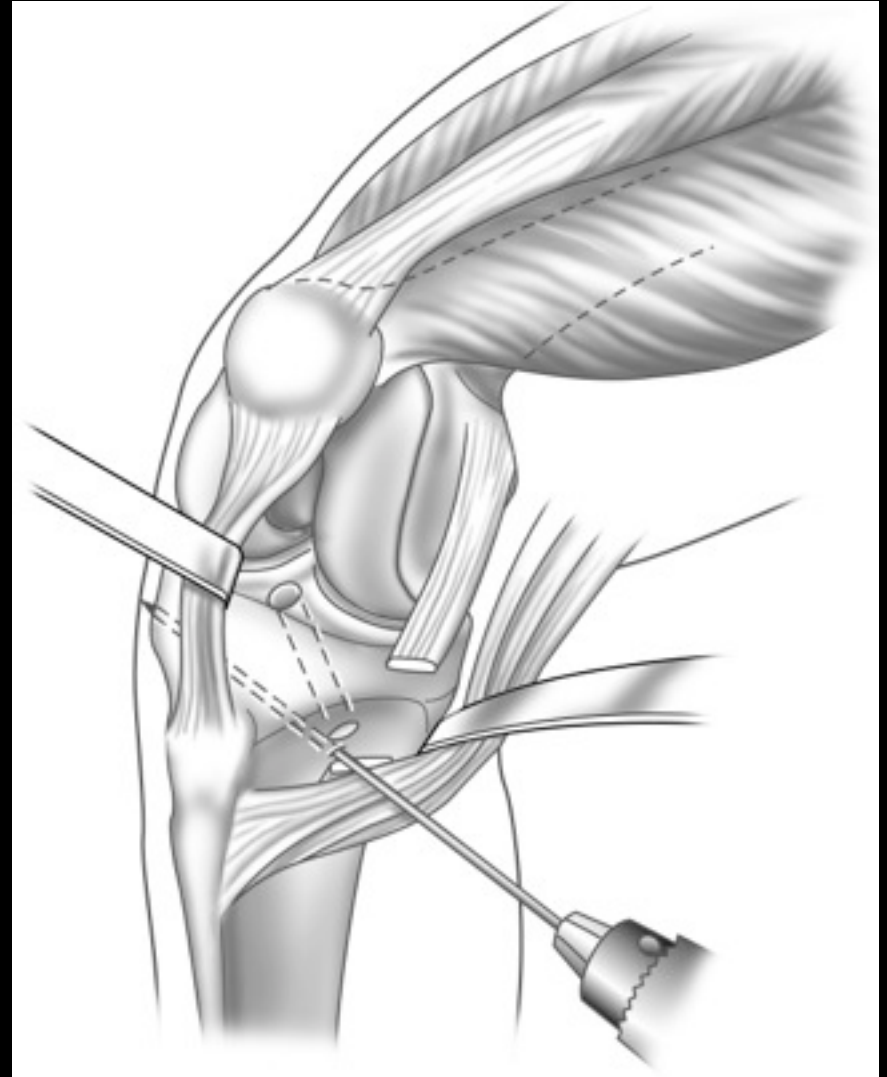
ACL + HTO: Opening wedge



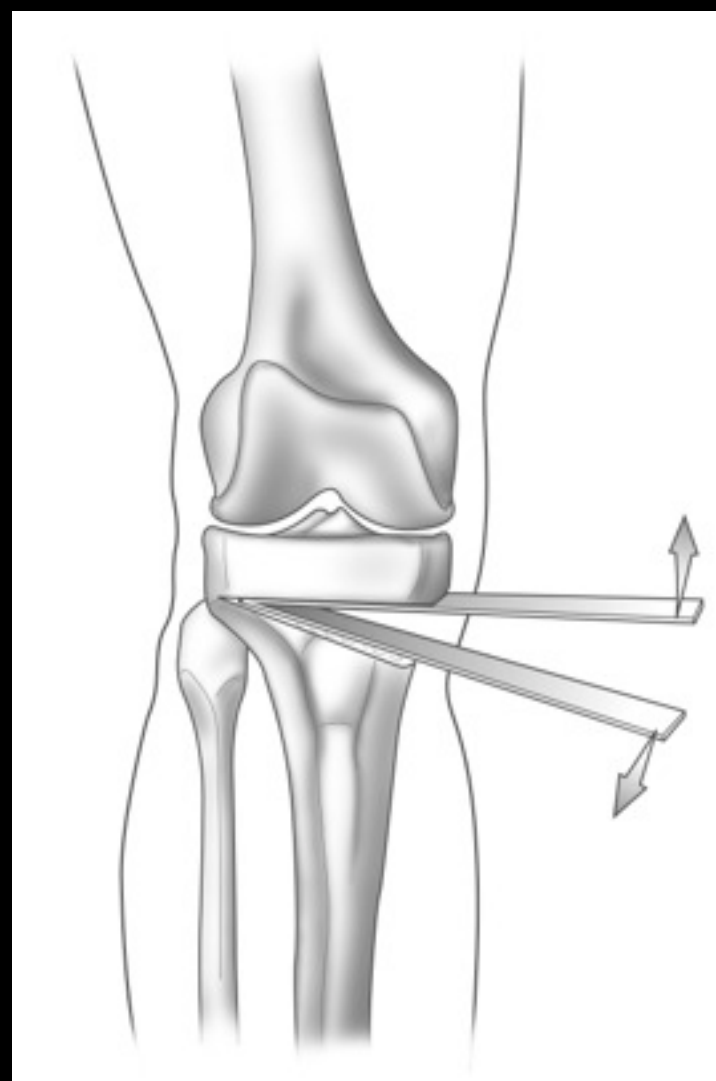
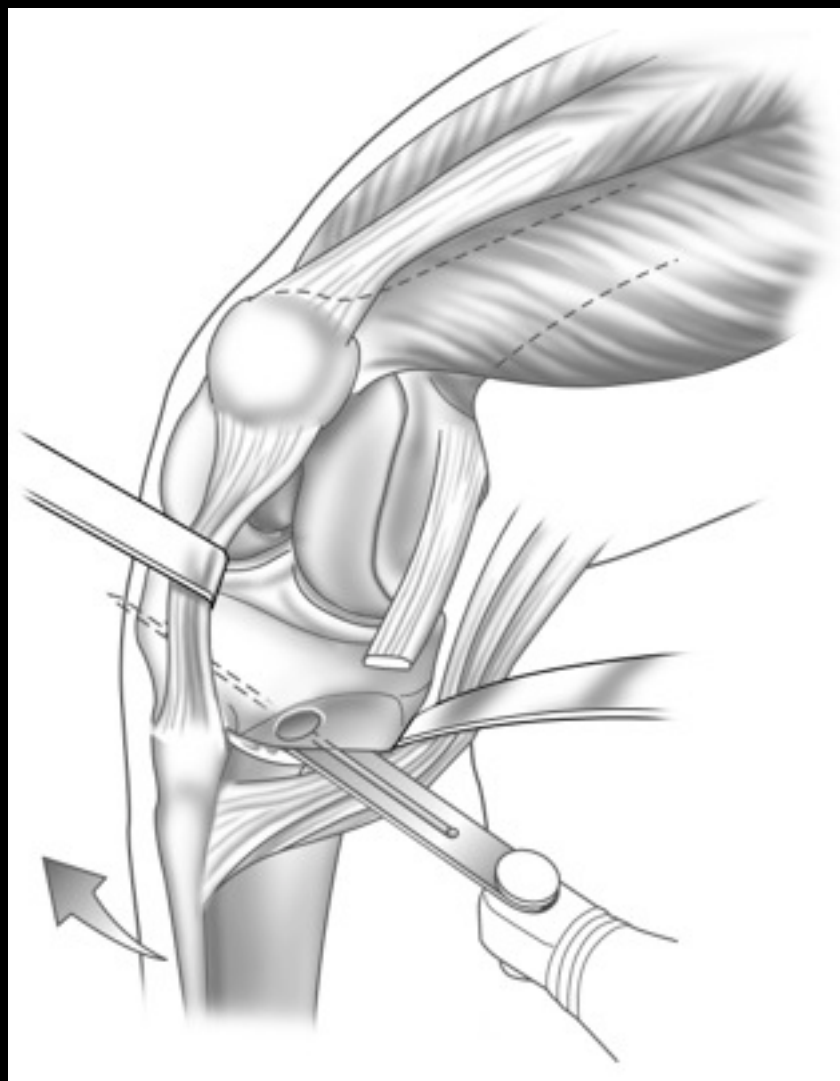
Patellar tendon



Hamstrings

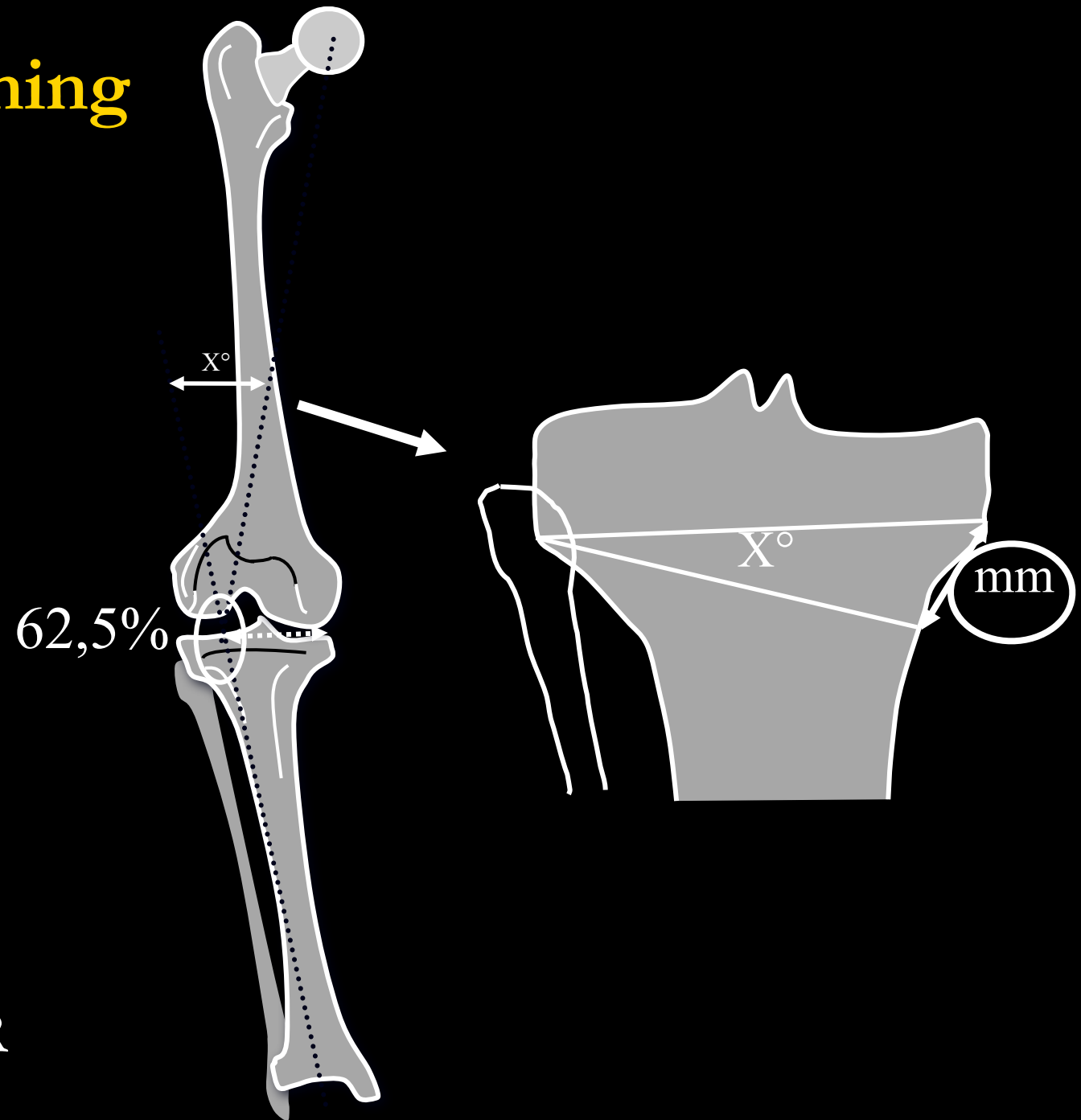


M Bonnin Springer-Verlag 2004



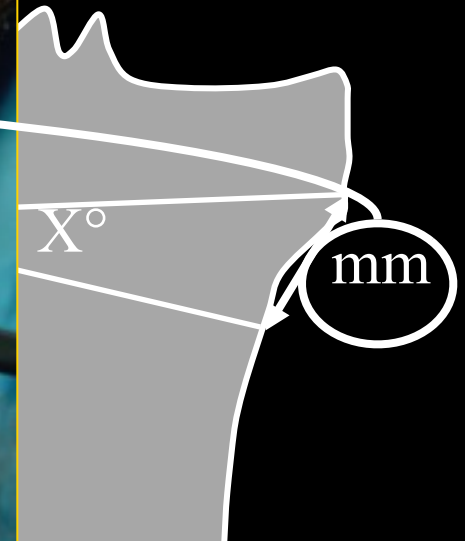
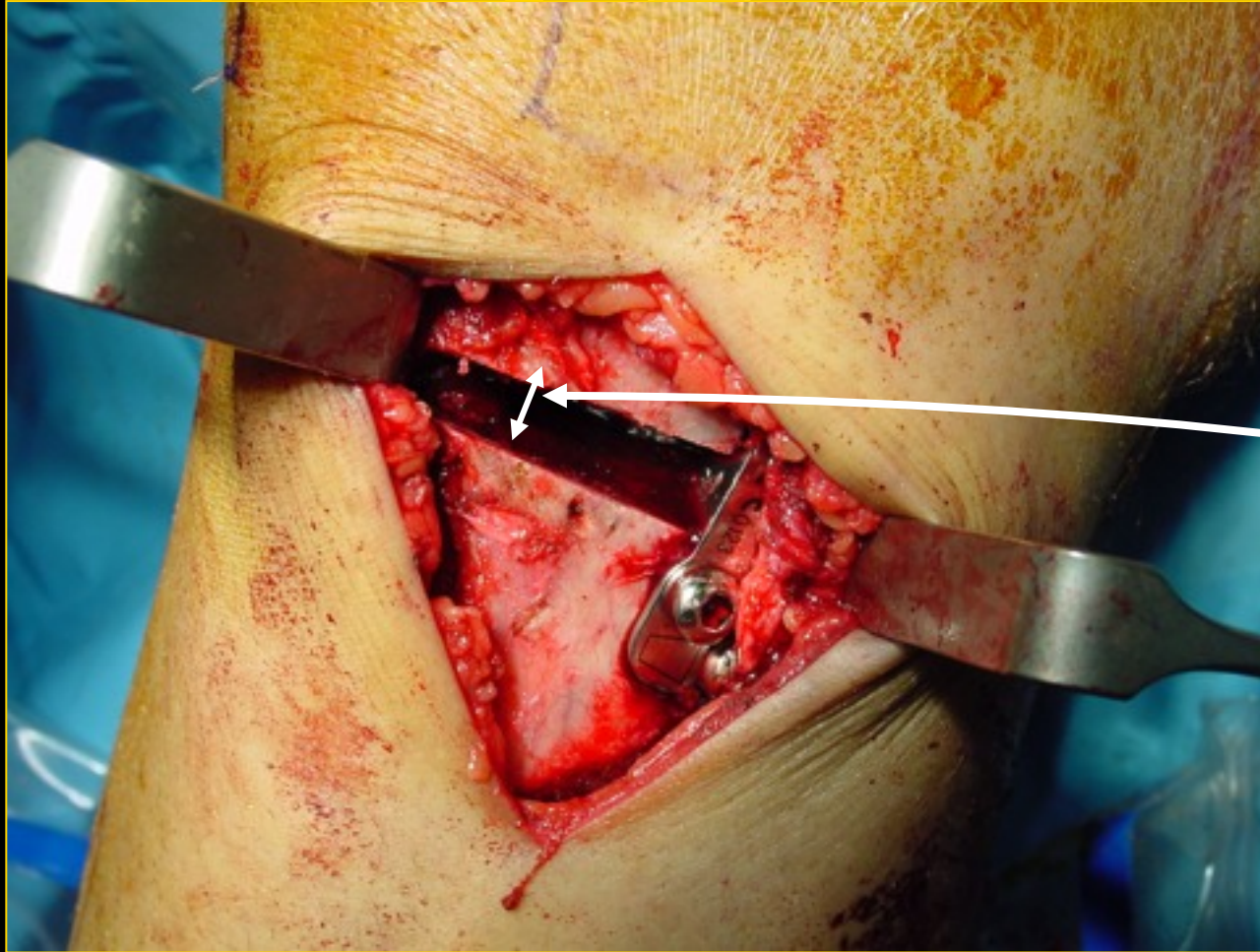
M Bonnin Springer-Verlag 2004

Preop planning



Dugdale CORR
1992

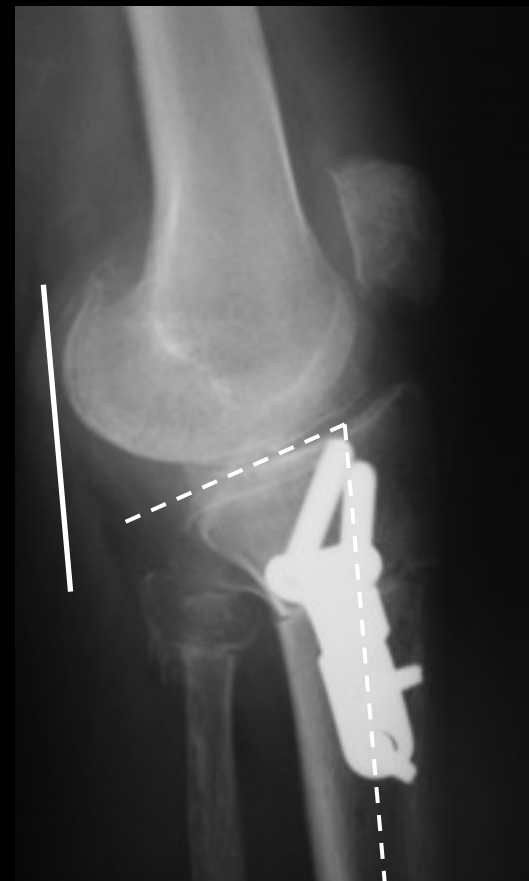
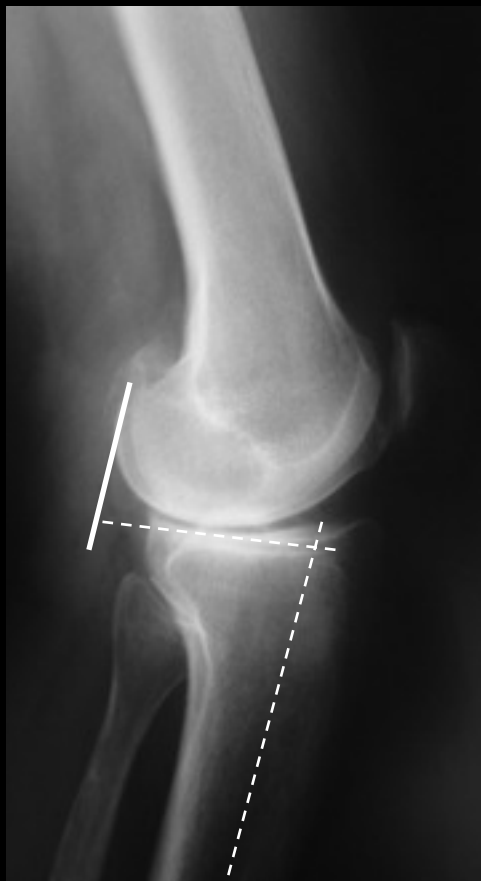
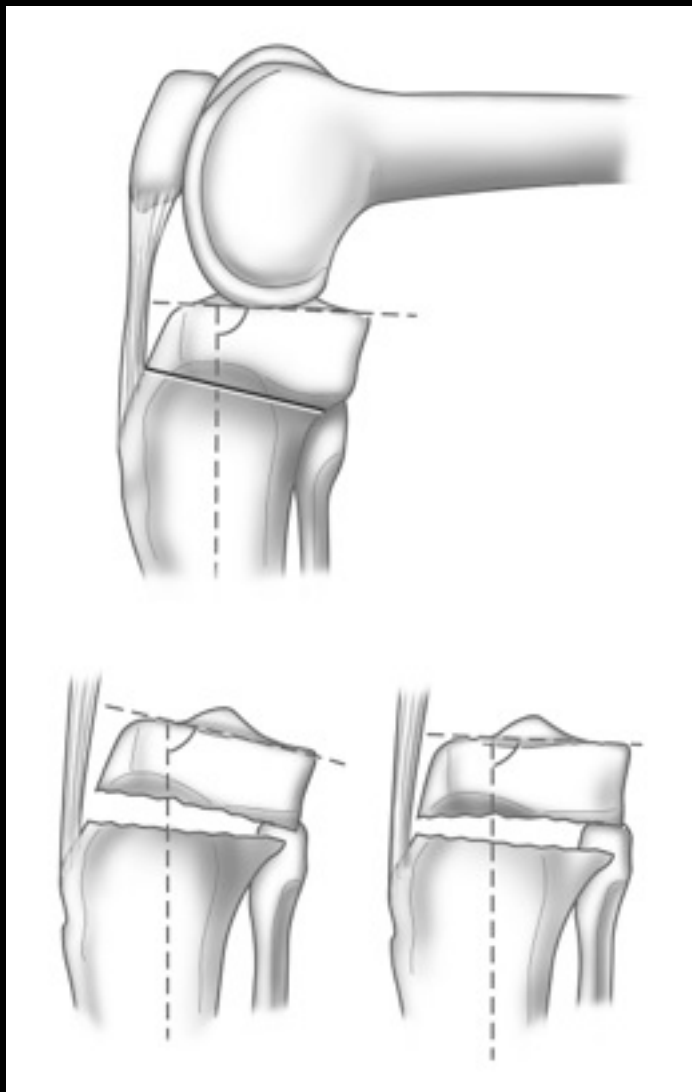
Preop planning



Dugdale CORR
1992

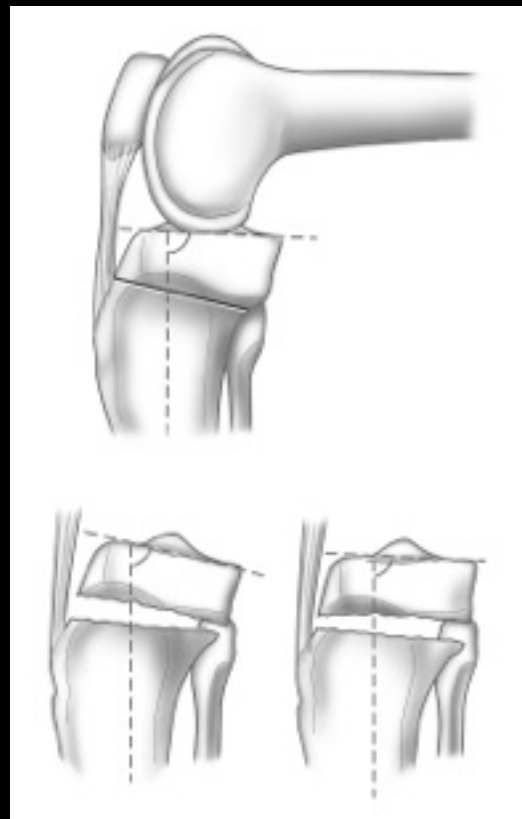


Opening wedge HTO : Tibial slope



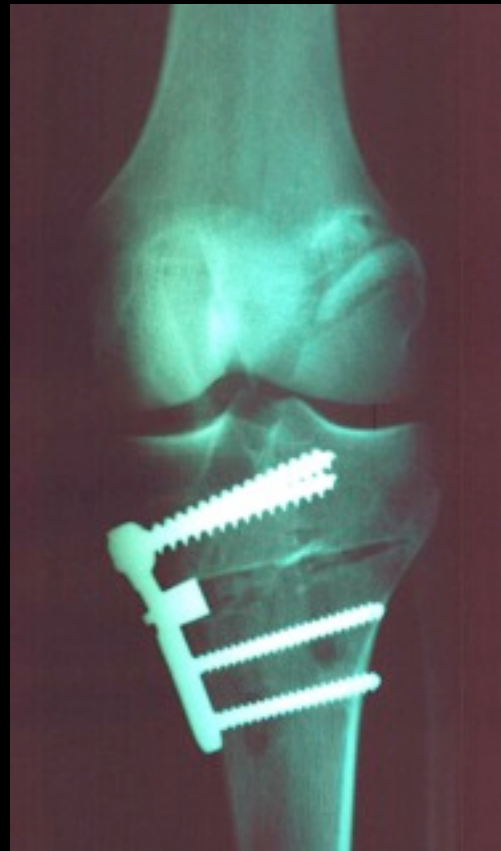
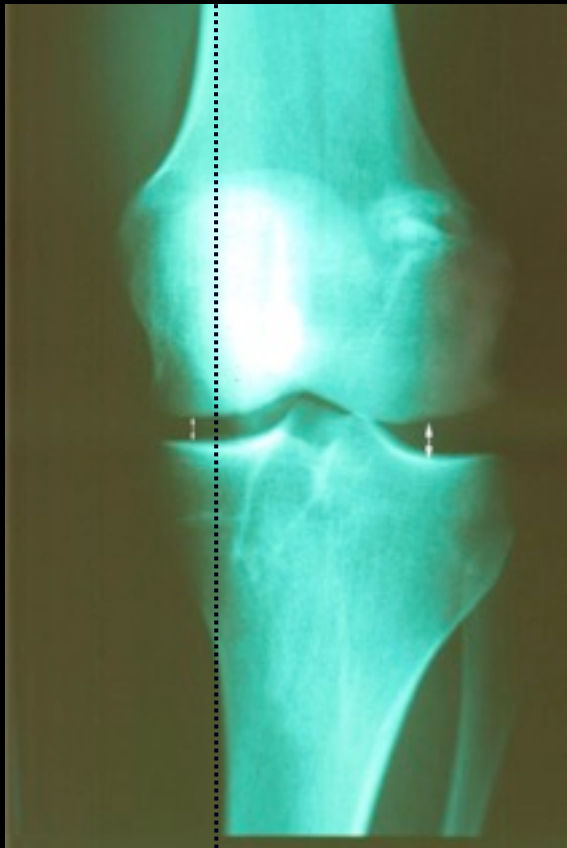


Opening wedge HTO : Tibial slope



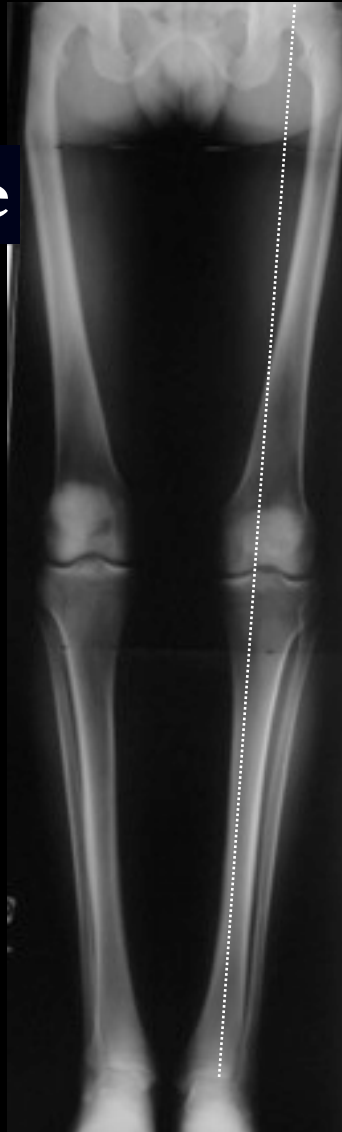
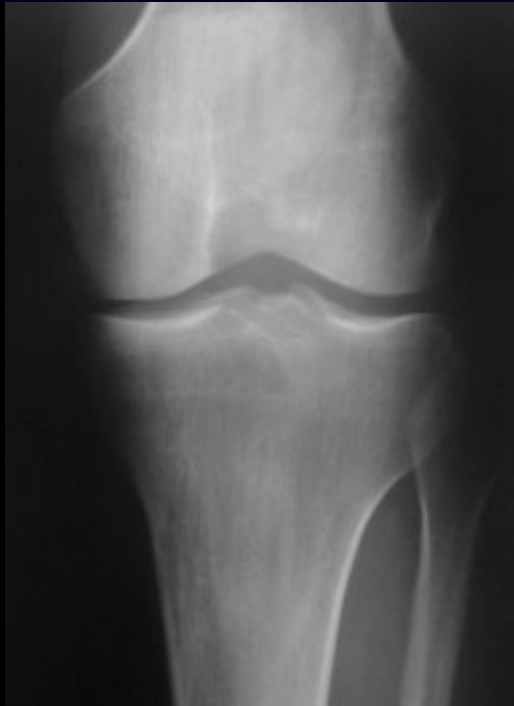
Grefe du LCA + OTV

LCA Varus Alignement Décoaptation PLC OK



31 ans Motocross Compet: LCL+ PLC

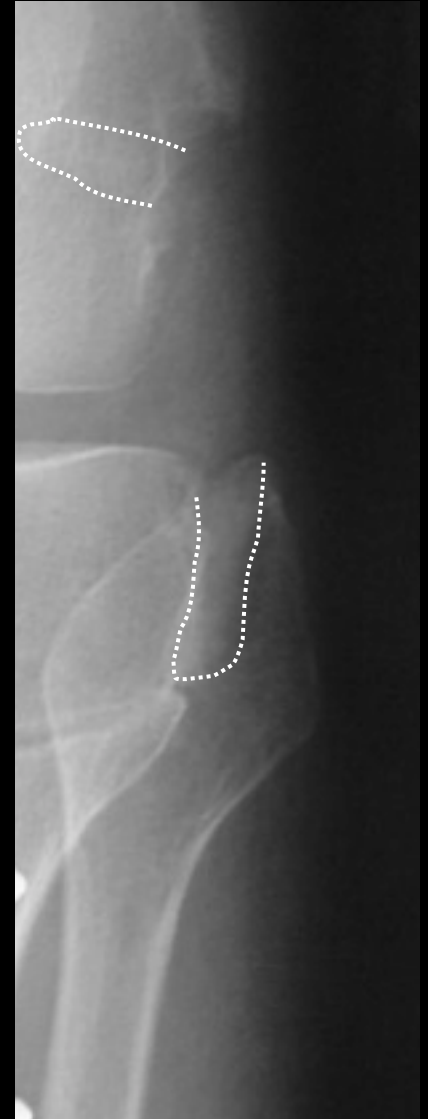
Monopodal Stance



Varus Stress



HTO + Lateral reconstruction



Conclusion

Peripheral lesions associated with ACL ruptures:



Under-diagnosed



Neglected during surgery



Explains 15% to 30% of graft failures



Clinical examination



MRI analysis



Surgical treatment if significant laxity

Reconstruction in chronic cases

Repair reconstruction in Acute cases