

Partial Meniscectomie

5th Advanced Course on Knee Surgery

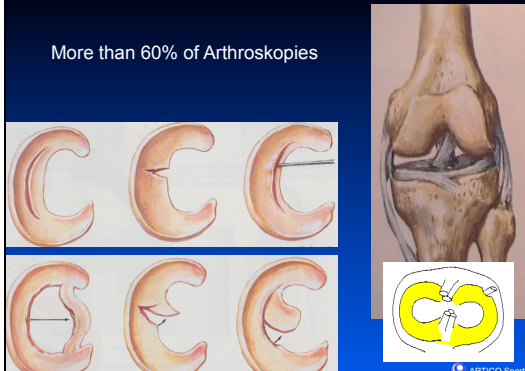
February 2nd – 7th 2014

Val d'Isère

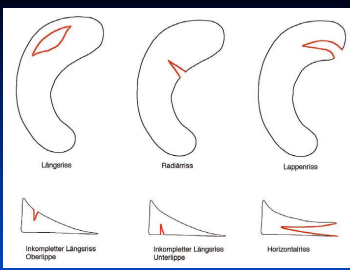
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More than 60% of Arthroscopies



The slide shows six diagrams of menisci in cross-section, illustrating different shapes and positions. To the right is a 3D anatomical illustration of a knee joint with the meniscus highlighted. Below the diagrams is a small circular inset showing a cross-section of a meniscus with a tear.



The slide displays six diagrams of menisci, each labeled with a type: Längsrisse (Longitudinal tears), Radialrisse (Radial tears), Leptenrisse (Thin tears), Inkompletter Längsrisse Oberlippe (Incomplete longitudinal tear, upper lip), Inkompletter Längsrisse Unterlippe (Incomplete longitudinal tear, lower lip), and Horizontalrisse (Horizontal tears).

Arthroscopy, 2011 Sep;27(9):1275-88. doi: 10.1016/j.arthro.2011.03.088. Epub 2011 Aug 6.

Meniscal repair versus partial meniscectomy: a systematic review comparing reoperation rates and clinical outcomes.

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Abstract

PURPOSE:
The aim of this investigation was to compare reoperation rates and clinical outcomes after meniscal repair and partial meniscectomy.

METHODS:
A systematic literature review was performed to identify outcome studies of arthroscopic meniscal repair (inside-out, outside-in, and all-inside techniques) or partial meniscectomy in patients with traumatic meniscal tears. The studies included patients with no previous injuries or operations.

RESULTS:
At short- and long-term follow-up, partial meniscectomy had a lower reoperation rate (1.4% [2 of 143] and 3.9% [52 of 1,319], respectively) than isolated meniscal repair (16.5% [47 of 284] and 20.7% [30 of 145], respectively). There was a slightly higher reoperation rate after partial lateral meniscectomy compared with partial medial meniscectomy. Repairs of the medial meniscus resulted in higher reoperation rates than repairs of the lateral meniscus. Meniscal repairs at the time of anterior cruciate ligament reconstruction had a lower failure rate than isolated repairs. In the limited number of studies with long-term clinical outcome scores, meniscal repair was associated with higher Lysholm scores and less radiologic degeneration than partial meniscectomy.

CONCLUSIONS:
Whereas meniscal **repairs have a higher reoperation rate than partial meniscectomies**, they are associated with better long-term outcomes.

Arthroscopy, 2012 Jan;28(1):123-30. doi: 10.1016/j.arthro.2011.08.282. Epub 2011 Nov 9.

Treatment of meniscus tears during anterior cruciate ligament reconstruction.

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Abstract

PURPOSE:
To define the incidence of meniscectomy, meniscus repair, and meniscus tears left in situ during anterior cruciate ligament (ACL) reconstruction.

METHODS:
A systematic search of PubMed and 7 sports medicine journal databases was performed to determine the treatment of meniscus tears during ACL reconstruction. Inclusion criteria were English language, publication in the last 10 years, clinical trials, all evidence levels, and skeletally mature or immature knees. Exclusion criteria were revision ACL reconstruction, concomitant ligament reconstruction, and studies with exclusion or inclusion criteria regarding meniscus surgery during ACL reconstruction.

RESULTS:
Of 634 articles identified, 159 met the inclusion criteria, encompassing 19,531 patients. There were **11,711 meniscus tears**; they were treated by meniscectomy in 66% (7,621 tears), treated by repair in 26% (3,022 tears), or left in situ in 9% (1,068 tears). Only 10 studies analyzed the treatment of meniscus tears according to the tibiofemoral compartment. These reported medial compartment tears were treated by meniscectomy in 63%, treated by repair in 27%, and left in situ in 9%. Lateral compartment tears were treated by meniscectomy in 71%, treated by repair in 14%, and left in situ in 14%. Only 24 studies identified the type of meniscus repair procedure performed. In 33 studies (21%) repair was performed more frequently than meniscectomy.

CONCLUSIONS:
Meniscectomy is performed 2 to 3 times more frequently than meniscus repair during ACL reconstruction. We were unable to analyze the effect of the location and type of meniscus tear, sex, age, or chronicity of injury on the treatment of meniscus tears. The number of potentially repairable meniscus tears that were treated by resection could not be identified.

CLINICAL RELEVANCE:
This study found that **meniscectomy was performed in 65% of meniscus tears**. This is concerning because studies have shown that, regardless of knee stability obtained after ACL reconstruction, meniscectomy accelerates degenerative joint changes.

42y M medial
meniscus signs since 2 years, effusion



The image shows an arthroscopic view of a knee joint. A large, dark, irregular tear is visible in the medial meniscus. The surrounding tissue appears inflamed and swollen.

