

Université Claude Bernard  Lyon 1

Influence of soft tissue release alignemnt and joint lines : stages of release

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Lyon
Val d'Isère 2014

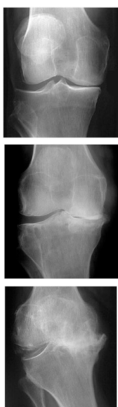
   Hôpitaux de Lyon

Stages of release in varus knees

2

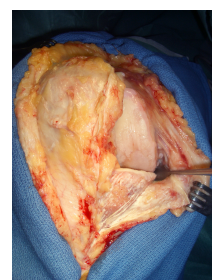
Introduction

- Fixed varus deformity is most common angular contraction in TKA patients
- Several medial release techniques available
 - Insall, Whiteside, Yagashita
 - Capsule and deep MCL
 - Superficial MCL distal on the tibia
 - Engh
 - osteotomy of the medial epicondyle
 - Neyret
 - capsule and deep MCL
 - pie crust superficial MCL at joint line
 - Superficial MCL distal on the tibia
- Purpose
 - achieve ligamentous balance in extension AND flexion



STAGE 1

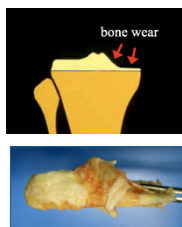
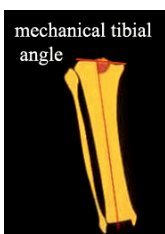
- Medial parapatellar approach
- Release of the anterior capsule
- Release of deep MCL



•+...

For all varus knees

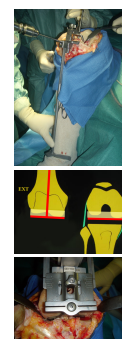
Varus knee



Reducibility of the deformity

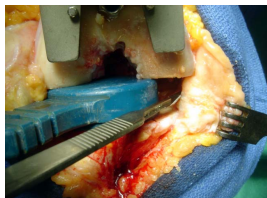
STAGE 2

- Tibial cut first perpendicular to mechanical axis
- Posterior femoral cut
 - posterior condyle reference
 - external rotation depending on distal offset

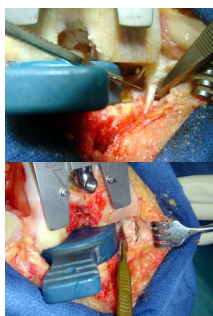
For all varus knees

Varus knee < 6°

+ Release of the MCL



Pie crust of the MCL



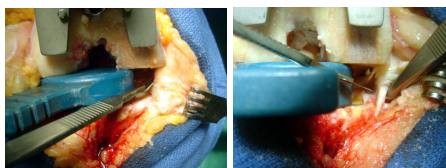
Varus knee

Pie crust of the MCL



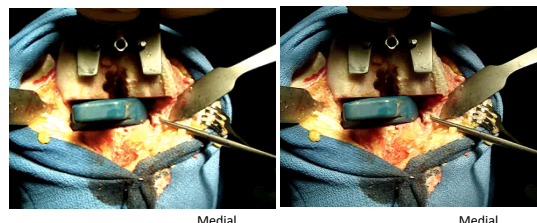
Surgical algorithm: OPTION 1

- Pie Crust of the superficial MCL at the joint line level. Only the tightest fibres of the MCL are addressed from the inside in flexion (anterior) and in extension (posterior) using an 11 blade



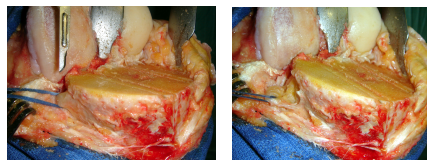
For moderate varus knees

Pie crust of the MCL



Surgical algorithm: OPTION 1bis

- Pie Crust of the superficial MCL at the joint line level
 - address selectively the posterior (extension) or anterior (flexion) fibers of the superficial MCL
- + release Semi-Membranosus

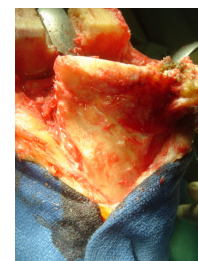
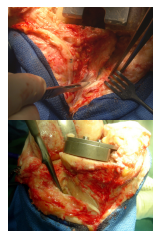


For moderate varus knees + flexion contracture

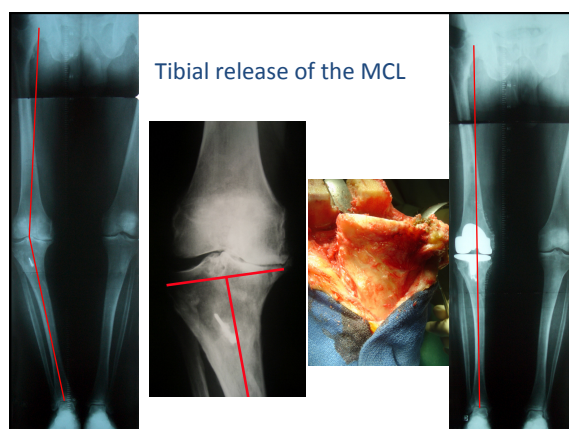
Varus knee 6-8°

Pie crust of the MCL

Tibial release of the MCL



Constitutional deformity 6-8°



Varus knee

+ Semi membranousus release

if varus knee + flexum

Surgical algorithm: OPTION 2

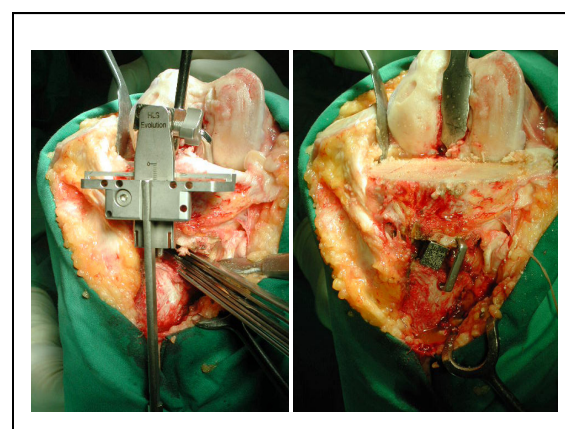
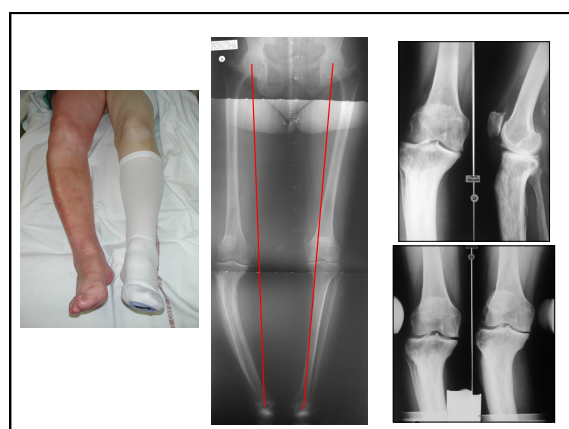
- Release of the superficial MCL on the distal tibia
+ release Semi-Membranosus

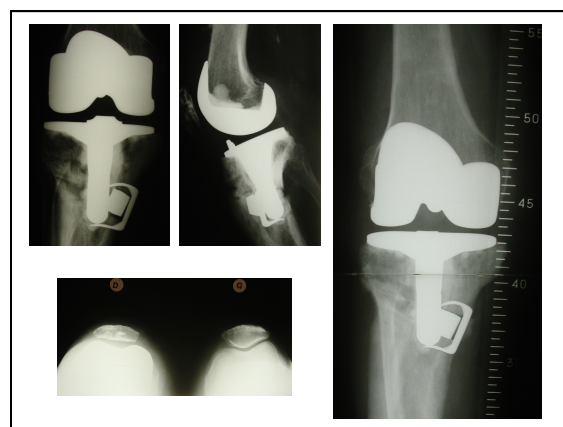
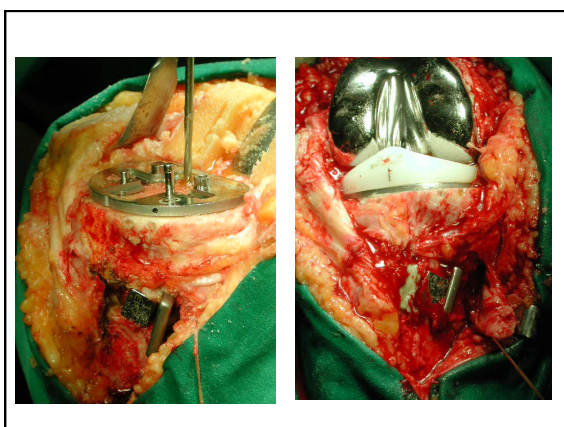
For severe varus knees

Varus knee > 8°

High Tibial Osteotomy + TKA

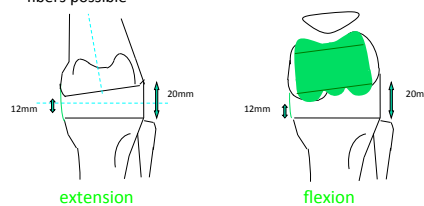
Constitutional deformity > 8°





Pie Crust of the Medial MCL

- safely allows you to lengthen/release the superficial MCL up to max. 8 mm at the jointline level
- selective release of **anterior** (flexion) or **posterior** (extension) fibers possible



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Rationale & Guidelines

- the choice of release technique is based upon
 - HKA
 - reducibility of the deformity
 - is done after the tibial cut... to assess flexion-extension gap asymmetry

- Always release of the capsule and deep MCL
- varus < 8°: release pie crust supMCL
- varus > 10°: release distal supMCL

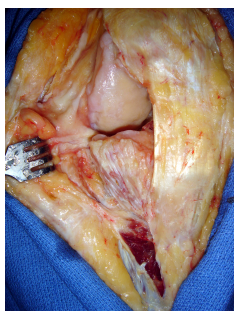
Stages of release in valgus knees

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Valgus knee

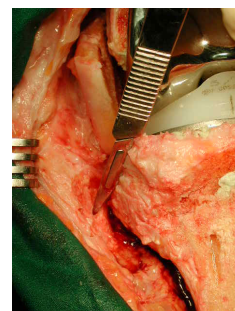
Lateral approach
Or medial

Ilio tibial band
release



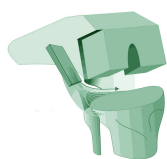
Valgus knee

Pie crust of the
ilio-tibial band



Valgus knee

Lateral femoral
sliding osteotomy



BURDIN, Br JBJS Nov 2002



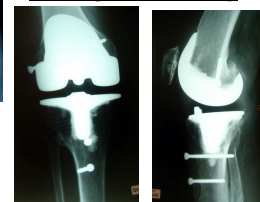
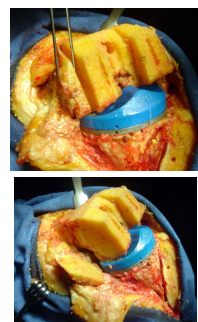
flexion



extension

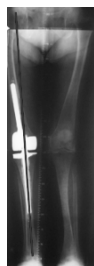
Valgus knee

Lateral femoral
sliding osteotomy



Valgus knee

Valgus knee + Severe medial laxity
Rotating hinge prosthesis ?



CONCLUSION

Strategy

Varus knee

CONSTITUTIONAL
DEFORMITY



<6°

Checked release
of the MCL

6-8°

Tibial release
of the MCL

>8°

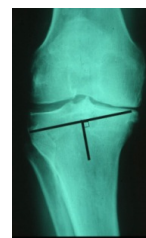
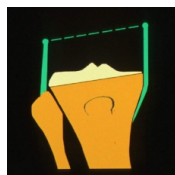
HTO+TKA

Unilateral lengthening

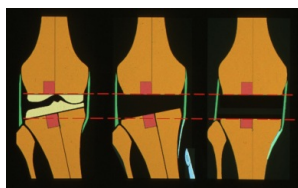
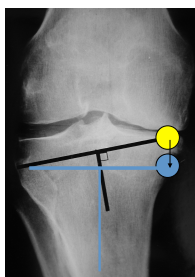
extra articular deformity, tibia varum

asymmetrical tibial cut

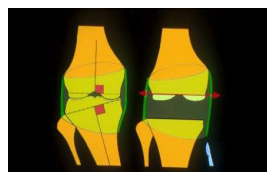
→ resection related laxity



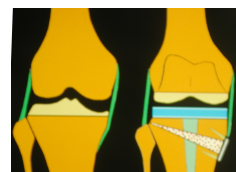
Unilateral lengthening



Limits for balancing



Unilateral lengthening



HTO + TKA

Strategy

valgus knee

Lateral approach

Ilio tibial band release

Lateral femoral osteot.

Pie crust of the
ilio tibial band

.....Rotating hinged

Thank you



CLINICAL RESEARCH

Residual Varus Alignment does not Compromise Results of TKAs
in Patients with Preoperative Varus

Robert A. Magnusson MD, Florent Weppe MD,
Guillaume Demeo MD, Elvire Servien MD, PhD,
Sébastien Lustig MD, PhD