

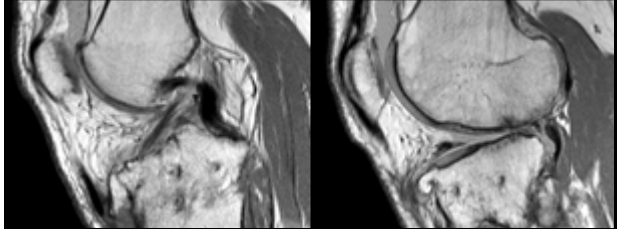
IMAGING OF LIGAMENT (ACL) REPAIR & COMPLICATIONS

F. Lecouvet, A. Larbi, B. Vande Berg, J. Malghem
Cliniques universitaires Saint-Luc – Bruxelles

lecouvet@yahoo.fr

Ligament repair

- Mainly ACL
- Frequency ↑
- Aim : avoid OA due to instability

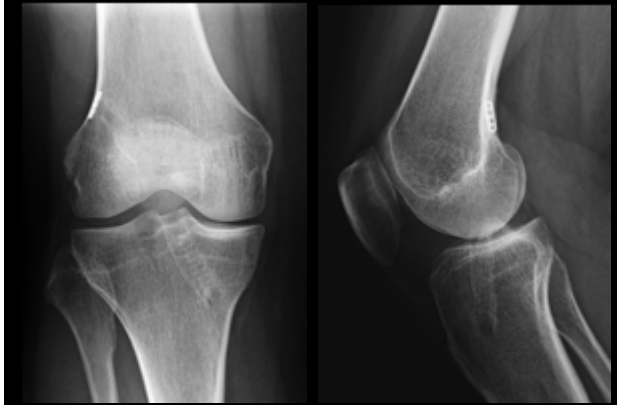


Technique

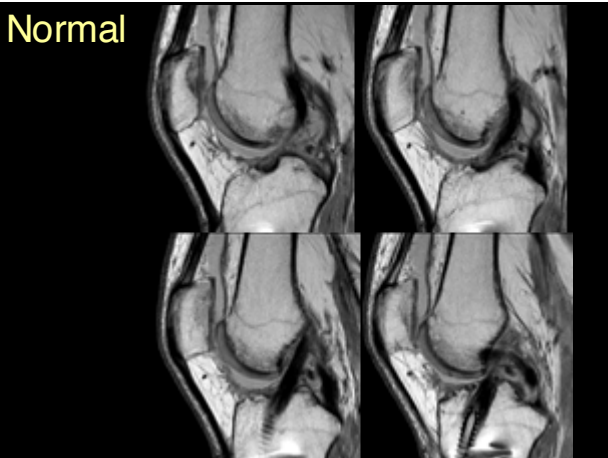
- Arthroscopic
- Mainly autograft
 - Bone – tendon – bone
 - « hamstrings »
- Tunnels- tibial
 - femoral
- + fixation



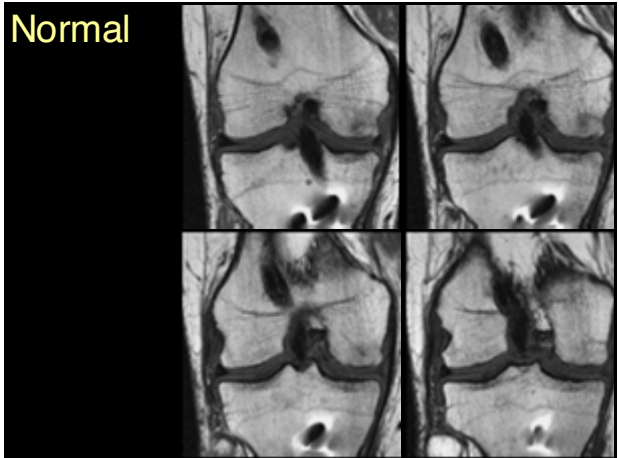
Normal



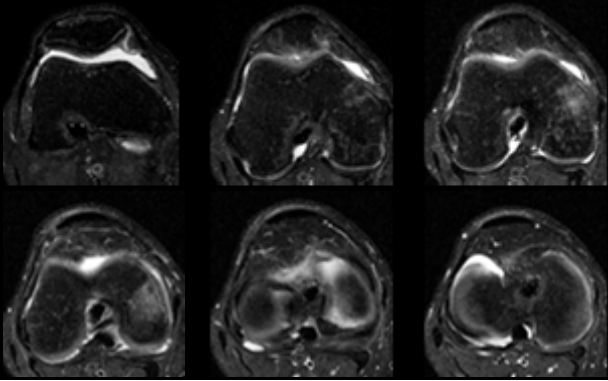
Normal



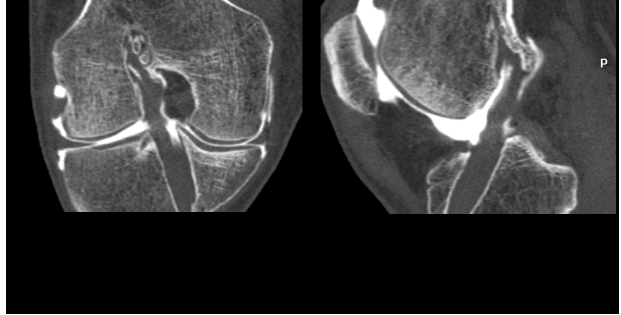
Normal



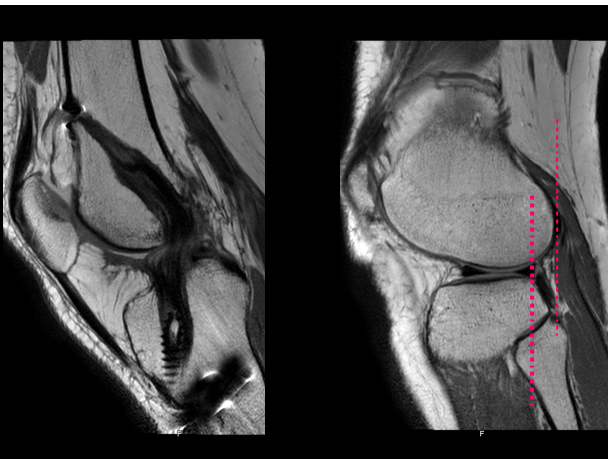
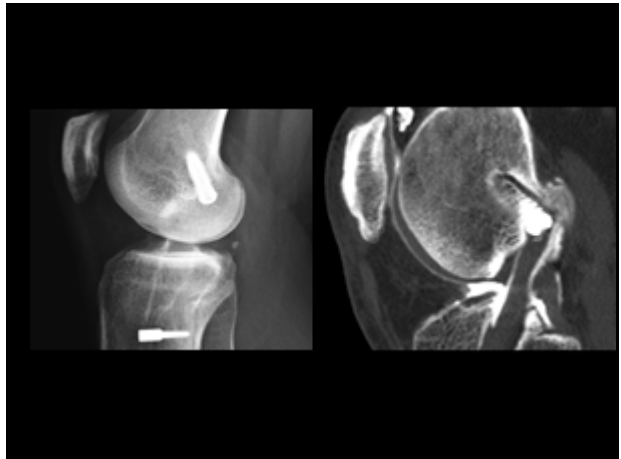
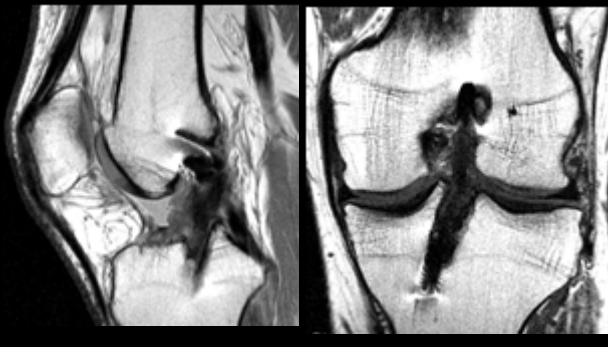
Normal



Normal

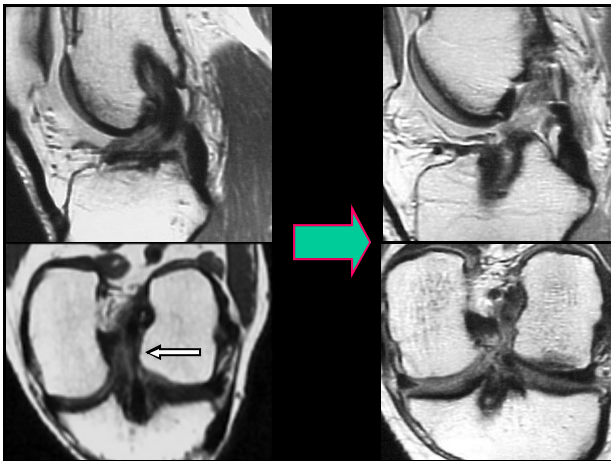


Abnormal position



« Impingement »

- Too anterior tibial tunnel
 - Too long graft
 - Screw, bone
 - Angulation
- Abnormal signal
→ Spontaneous tear



Traumatic Re-Tear

MRI

(CT arthrography)

Same signs as for native ACL

Direct

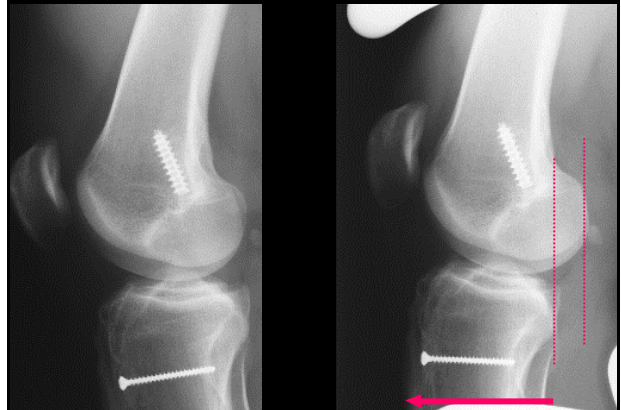
- Continuity
- Orientation
- Contours
- Signal

Indirect

- Impactions
- Ant; tib. translation

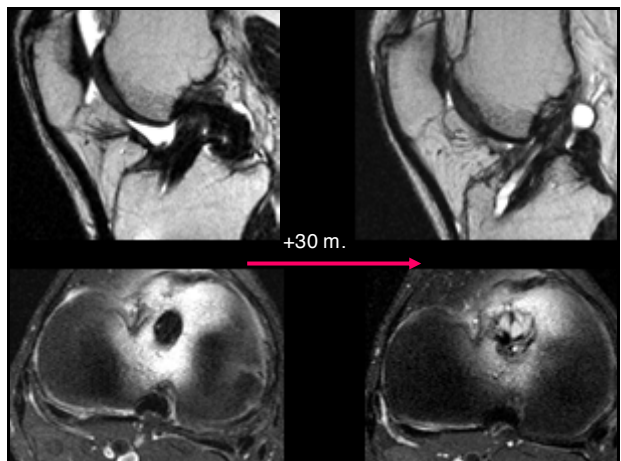
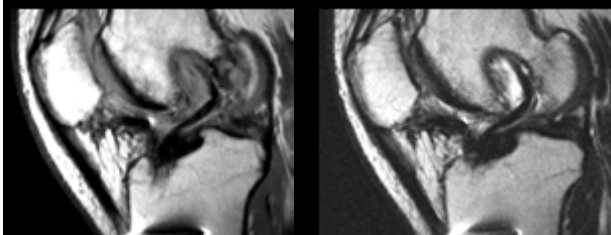


Doubt : functional evaluation



Widening and cysts

- Physiologic is possible
- Cysts : lytic reaction, bone-ligt. impingement ?



Arthrofibrosis

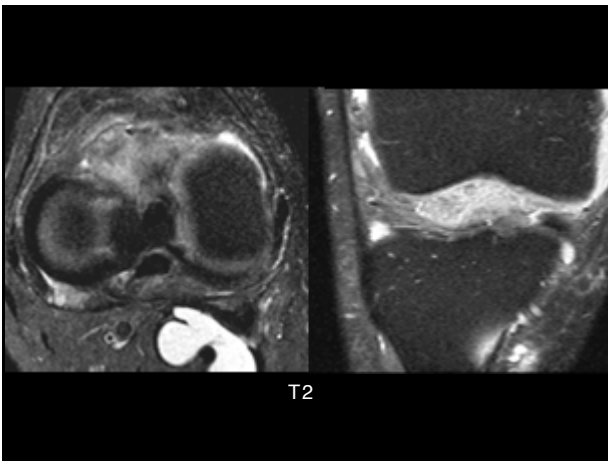
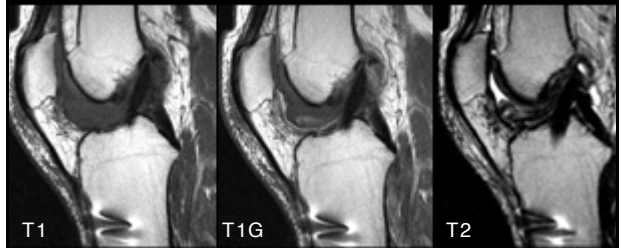
= fibrous hyperplasia due to inflammation

- « Cyclope » = localized form
 - Arthroscopic appearance
 - Histo : nodule, fibrosis, granul. t.
(? reaction against remnants of ACL?)
- Diffuse forms

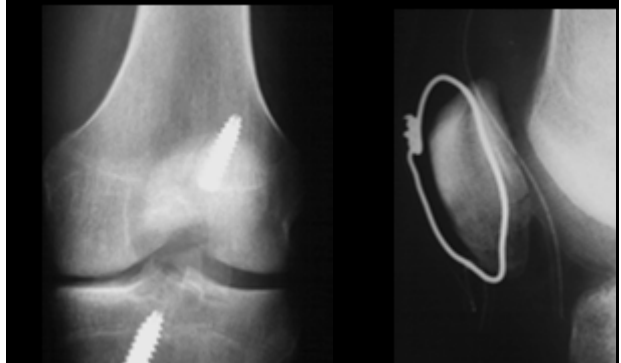
Clin : pain, functional limitation

R/ : arthroscopic debridement

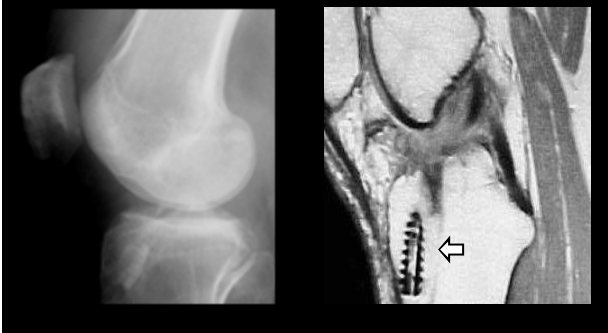
Cyclope



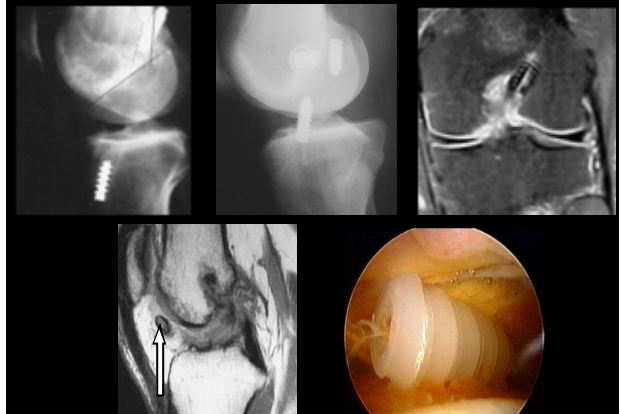
Fracture at harvest site



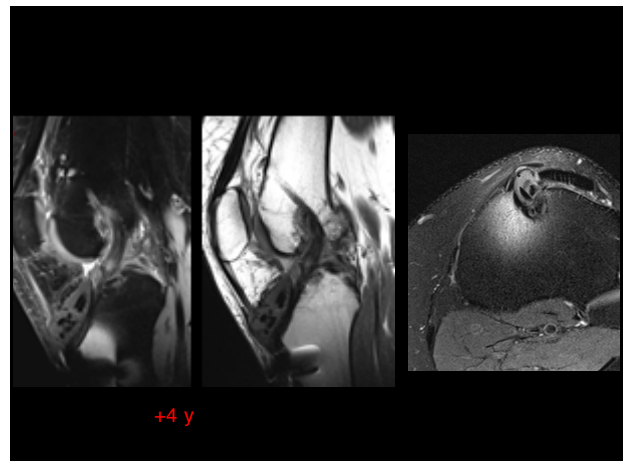
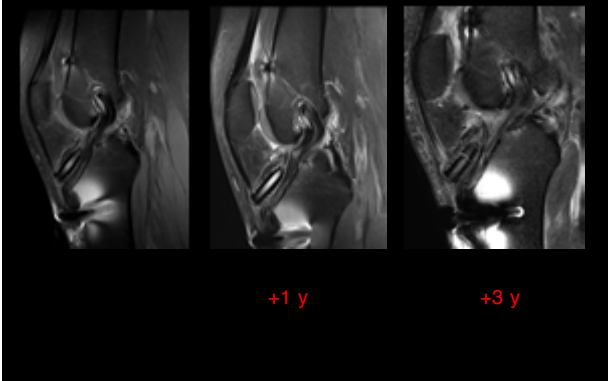
Integrity bone and screws



Mobilisation



Reaction



Complications

- Impingement
- Re-tear (trauma.)
- Cysts
- Arthrofibrosis (cyclope)
- Fracture (bone-tendon)
- Reaction or mobilisation of fixation material
- Infection, capsulitis, ...
- Nervous (neuroma ...)

•MRI

•CT A°

•Dynam. Xrays