



Epidemiology and diagnosis of lateral root tears

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What is a root tear ?

Defined as an avulsion injury of the tibial insertion of the meniscus or a radial tear of the meniscus close from the insertion of the meniscus onto the tibial plateau (1 cm)





Posterior Lateral Meniscus Root Tear

MM root tears usually degenerative and found in middle-age





LM tears are usually traumatic and are associated with ACL tears



Courtesy C Brown





LM tears are usually traumatic and are associated with ACL tears



Lateral root tears

An important difference between the medial and lateral meniscus is the additional attachment of the posterior lateral meniscal horn to the medial femoral condyle via the **Meniscofemoral ligament (MFL)**





Prevalence

Knee Surg Sports Traumatol Arthrosc (2015) 23:119–125 DOI 10.1007/s00167-014-2904-x

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Posterior root tears of the lateral meniscus

Matthias J. Feucht · Gian M. Salzmann · Gerrit Bode · Jan M. Pestka · Jan Kühle · Norbert P. Südkamp · Philipp Niemeyer Review Posterior root tears of the LM

7–12 % of patients with a tear of the ACL



Prevalence

n=228 ACLr



Fig. 4 Diagram showing the prevalence of meniscus tears and root tears



Intact ACL

> AJR Am J Roentgenol. 2009 Feb;192(2):480-6. doi: 10.2214/AJR.08.1300.

MR diagnosis of posterior root tears of the lateral meniscus using arthroscopy as the reference standard

Arthur A De Smet¹, Donna G Blankenbaker, Richard Kijowski, Ben K Graf, Kazuhiko Shinki

559 knees with MRI

+ arthroscopic correlation

8 % of patients with an ACL tear Only 0.8 % of patients with an intact ACL



Prevalence

2021 Review

Clinical, Radiographic, and Arthroscopic Outcomes of Surgical Repair for Radial and Avulsed Lesions on the Lateral Meniscus Posterior Root During ACL Reconstruction

A Systematic Review

Tong Zheng,* MD, Guanyang Song,* MD, Yue Li,* MD, Zhijun Zhang,* MD, Qiankun Ni,* MD, Yanwei Cao,* MD, Zheng Feng,* MS, Hui Zhang,*[†] MD, and Hua Feng,*[†] MD Investigation performed at Sports Medicine Department, Beijing Jishuitan Hospital, Beijing, China Systematic review included 215 knees in 215 patients who underwent LMPR repair and ACLR

There were 139 (64.7%) men and 76 (35.3%) women with a mean age of 28.7 years (range, 24.6-34.5 years) across all studies



Clinical examination

- No specific clinical signs : Pain, Joint line tenderness, posterolateral knee pain at full flexion, positive McMurray test
- Lateral meniscal extrusion at the lateral joint line when valgus stress is applied to the extended knee ?







Knee Surg Sports Traumatol Arthrosc (2007) 15:427–430 DOI 10.1007/s00167-006-0179-6

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Arthroscopic reduction and internal fixation of an avulsion fracture of the posterior horn of the lateral meniscus

Masayuki Hamada · Takahide Miyama · Yukari Takeyasu · Shingo Tsutsumi · Konsei Shino



Fig. 1 An anteroposterior X-ray film of the right knee showed a small fragment at the intercondylar eminence



MRI

• Sensitivity of 94 %, Specificity of 89 % (De Smet et al)

Assessing coronal and sagittal images on the lateral margin of the tibial eminence

• Direct sign : ghost meniscus sign

« absence of the meniscus or high signal replacing the normal dark meniscal signal, with a normal meniscal signal shown on the immediately adjacent images »

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MRI

Indirect signs

1. Meniscal extrusion is observed infrequently

- 40% for Ahn et al Arthroscopy 2010
- 23 % for Brody et al Radiology 2006
- 2. Subchondral bone marrow edema







Arthroscopic

- LMPRT Can only be proven by arthroscopic examination
- The posterior horn can be displaced superiorly (positive "lift-off" test) and anteriorly into the joint space
- The Integrity of the MFL is controlled

