

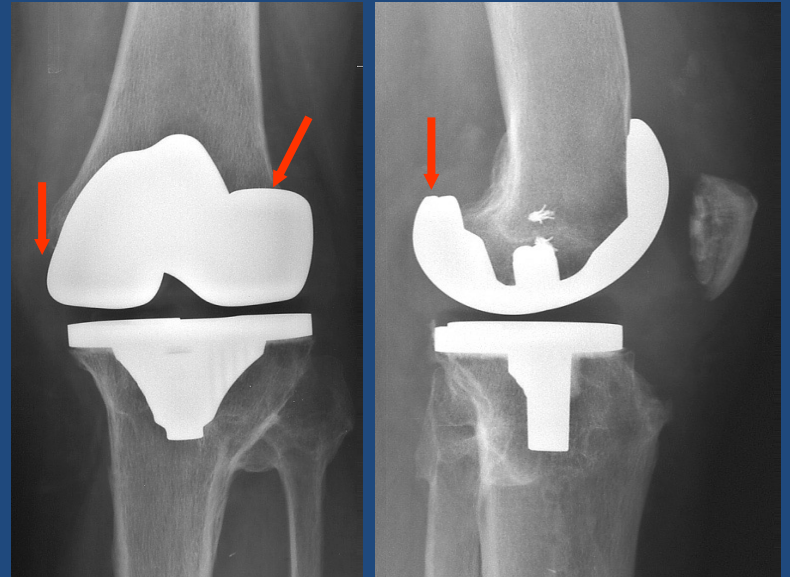
Pr Thomas NERI

MD, PhD



Painfull tka

Soft tissue impingement (itb, mcl, popliteus or patellar tendon)



PAINFUL TKA

No Free Interval



SOFT TISSUE IMPINGEMENTS



**Oversized
implants**



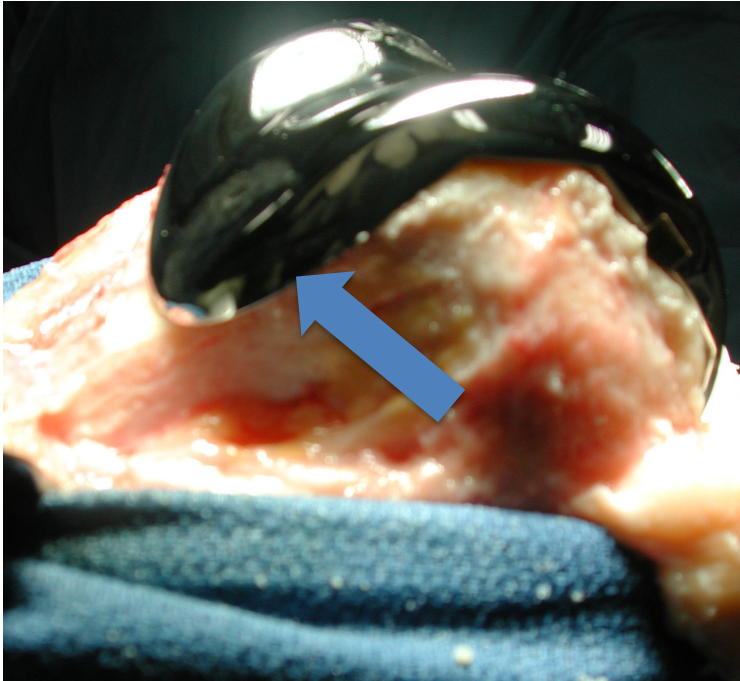
**Implant
Malposition**

Oversized implants



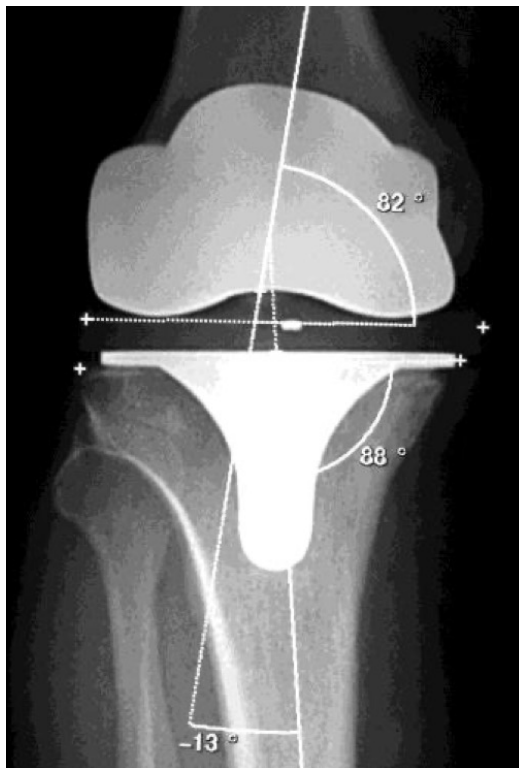
Courtesy C Batailler

Oversized implants



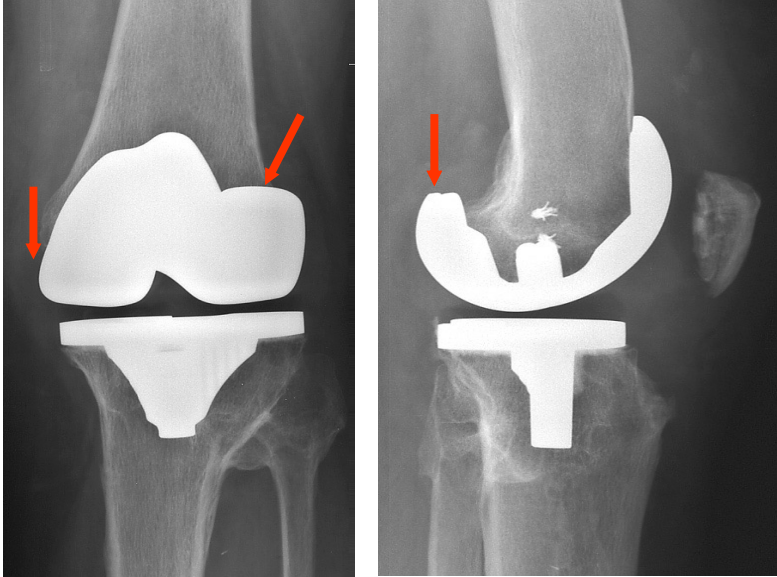
Courtesy C Batailler

Implant Malposition



Outline

- Introduction
- **anterior impingement**
- medial impingement
- lateral impingement



Patellar tendon

> *Knee Surg Sports Traumatol Arthrosc.* 2016 Aug;24(8):2532-40.
doi: 10.1007/s00167-015-3512-0. Epub 2015 Jan 21.

Oversizing the tibial component in TKAs: incidence, consequences and risk factors

Michel P Bonnin¹, Mo Saffarini², David Shepherd³, Nadine Bossard^{4 5 6},
Emmanuelle Dantony^{4 5 6}

	Undersized		Oversized		<i>p</i> value*
	Mean ± SD	Range	Mean ± SD	Range	
Gain on pain score					
APL	37.2 ± 18.6	3–64	33.0 ± 19.6	–14–83	n.s.
APM	34.1 ± 19.7	–11–83	32.1 ± 19.3	–14–56	n.s.
AP	45.5 ± 16.8	17–69	31.9 ± 19.0	–14–83	0.006
MLT	37.1 ± 21.7	–5.6–83.3	31.3 ± 17.4	–13.9–75.0	n.s.
Gain on KOOS score					
APL	30.2 ± 18.6	–5.6–61.4	28.3 ± 16.3	–16.2–68.6	n.s.
APM	29.1 ± 15.6	–6.6–68.6	26.9 ± 19.3	–16.2–65.8	n.s.
AP	35.9 ± 17.8	6.8–65.8	27.5 ± 16.2	–16.2–68.6	0.065
MLT	31.3 ± 18.5	–5.9–68.3	27.2 ± 15.0	–16.0–59.6	n.s.

For AP: undersized > oversized

	Undersized		Oversized		<i>p</i> value*
	Mean ± SD	Range	Mean ± SD	Range	
Pain score					
APL	84.4 ± 13.6	56–100	78.4 ± 18.3	28–100	n.s.
APM	79.5 ± 18.1	28–100	78.2 ± 17.1	39–100	n.s.
AP	88.8 ± 12.2	61–100	77.8 ± 18.1	28–100	0.012
ML	81.1 ± 18.4	36.1–100	77.3 ± 17.8	27.8–100	n.s.
KOOS score					
APL	69.4 ± 18.3	33–98	63.9 ± 17.0	24–97	n.s.
APM	65.3 ± 16.9	24–97	62.7 ± 18	25–98	n.s.
AP	72.9 ± 14.2	54–98	63.5 ± 17.3	24–97	0.059
ML	67.7 ± 16.8	32.6–97.9	62.3 ± 17.3	24.3–97.0	n.s.
Knee Flexion					
APL	124.3 ± 10.3	100–140	122.1 ± 9.8	95–140	n.s.
APM	122.6 ± 9.5	100–140	121.7 ± 10.9	95–140	n.s.
AP	123.9 ± 9.2	110–140	122.2 ± 9.9	95–140	n.s.
ML	124.7 ± 8.6	100–140	121.0 ± 10.3	95–140	0.034

functional outcomes (pain, KOOS) are lower in the case of anteroposterior oversizing.

Patellar tendon

Due to:

- Anterior malposition of tibial implant
- malrotation of tibial implant

consequences

- Anterior knee pain
- PT tendinopathy

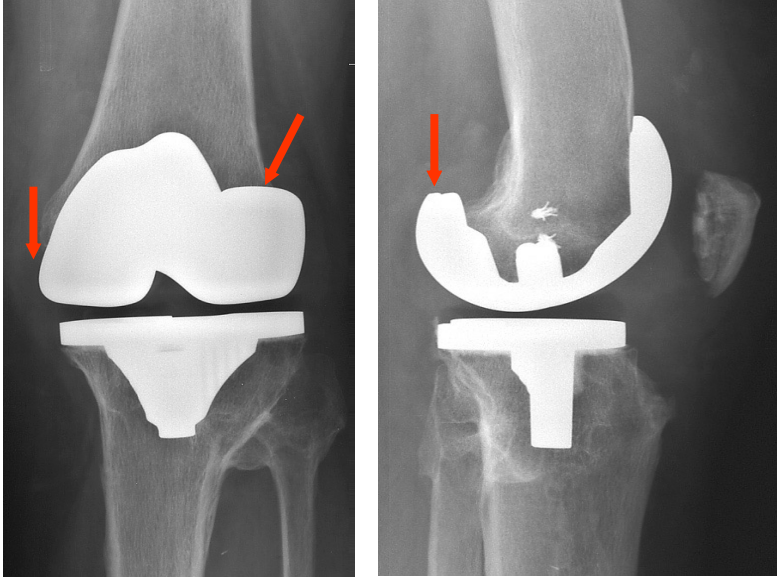
Treatment: revision



Courtesy M BONIN

Outline

- Introduction
- anterior impingement
- **medial impingement**
- lateral impingement



Similar to meniscal Flap
Flap Trapped Beneath the Medial Collateral
Ligament (MCL)

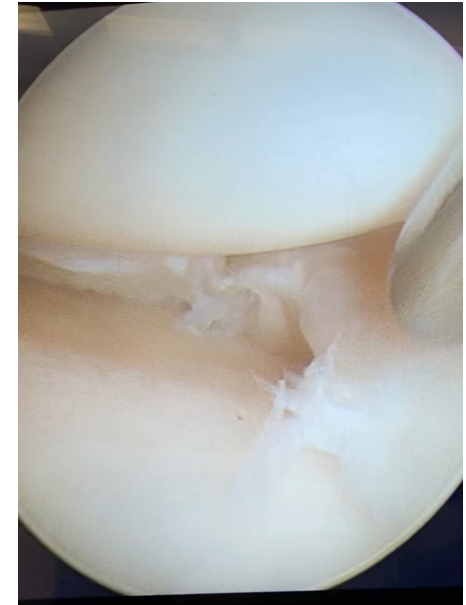
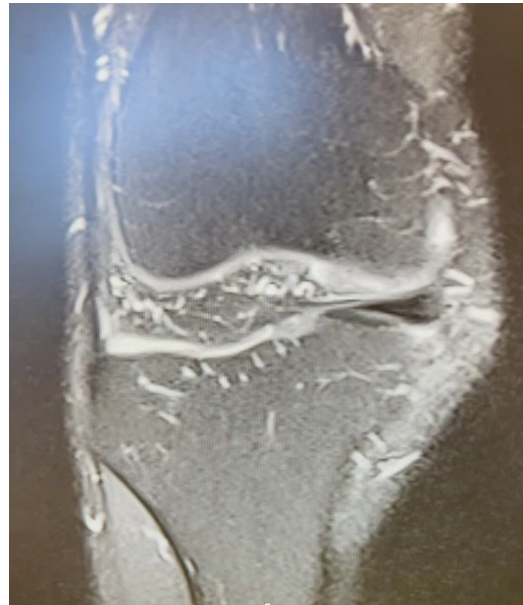
Leading to

- Osteomeniscal Conflict
- Sleeper's Sign (medial pain)



For TKA

- Medial overhang
- Medial cement protusion

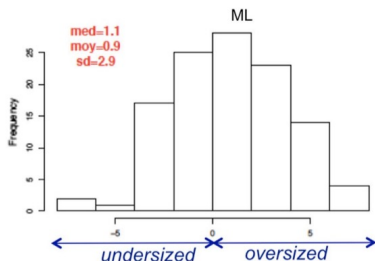


Medial overhang

> *Knee Surg Sports Traumatol Arthrosc.* 2016 Aug;24(8):2532-40.
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Oversizing the tibial component in TKAs: incidence, consequences and risk factors

Michel P Bonnin¹, Mo Saffarini², David Shepherd³, Nadine Bossard^{4 5 6},
Emmanuelle Dantony^{4 5 6}




incidence of oversized tibial plateau components is surprisingly high

	Undersized		Oversized		p value*
	Mean ± SD	Range	Mean ± SD	Range	
Pain score					
APL	84.4 ± 13.6	56–100	78.4 ± 18.3	28–100	n.s.
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mediolateral oversizing:

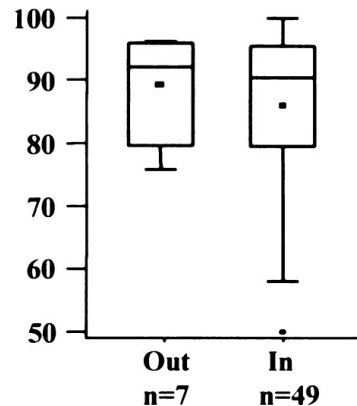
- decreased knee flexion
- no influence on PROMS

Medial overhang

► Int Orthop. 2009 Oct 9;34(8):1145–1151. doi: [10.1007/s00264-009-0881-3](https://doi.org/10.1007/s00264-009-0881-3) 

Correlation of positioning and clinical results in Oxford UKA

[Michael Clarius](#)¹, [Christian Hauck](#)¹, [Joern B Seeger](#)¹, [Maria Pritsch](#)², [Christian Merle](#)¹, [Peter R Aldinger](#)^{1,8}

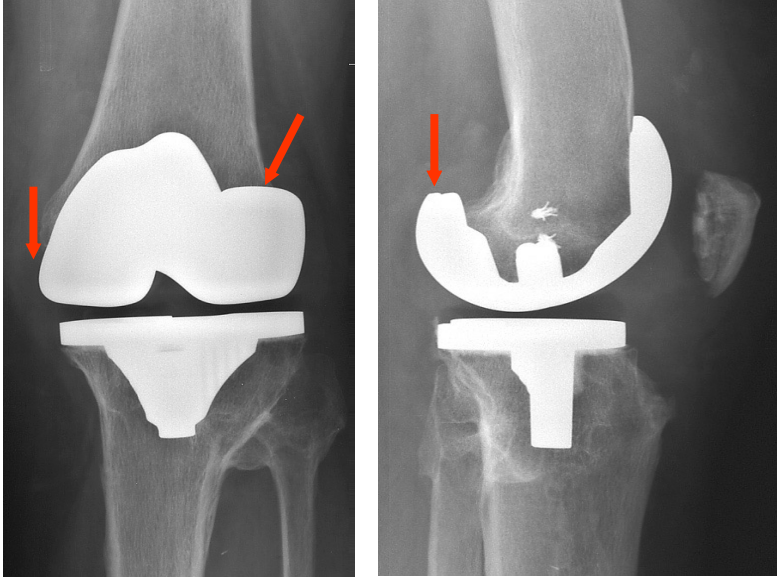



The proposed medial fit (0 to 2 mm) was achieved in 31 knees (55%) (Fig. [14](#)). Six implants were overhanging 3 mm or more, 14 prostheses were at least 2 mm too short. Mean medial fit was -0.1 mm (SD 2.0 mm; range -5 to 5 mm). Differences between AKS-Scores were not significant in both groups (Fig. [15](#)) ($p = 0.6814$).

Cut-off for medial
overhang
= 3 mm

Outline

- Introduction
- anterior impingement
- medial impingement
- **lateral impingement**



► Orthop Rev (Pavia). 2024 Mar 17;16:93014. doi: [10.52965/001c.93014](https://doi.org/10.52965/001c.93014) 

Isolated lateral-sided knee pain in total knee arthroplasty. A review

[Naga Suresh Cheppalli](#)¹, [Prabhudev Prasad Purudappa](#)², [Ryan Price](#)³, [Yogesh Kolwadkar](#)⁴, [Sreenivasulu Metikala](#)⁵

ITB friction syndrome

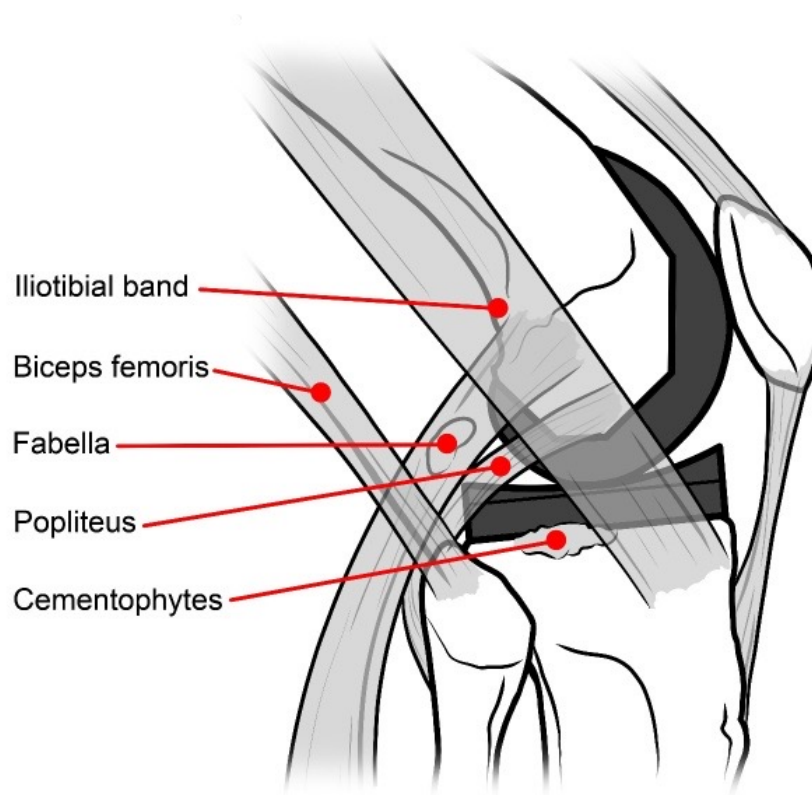
ITB traction syndrome

Biceps tendinitis

Fabella syndrome

Synovial tissue impingement

Popliteus tendon impingement



ITB FRICTION Syndrome →



= irritation of ITB against an underlying prominent structure including unresected osteophytes, cementophytes, and misaligned or overhanging implants

Clinical Presentation:

- Localized tenderness along ITB
- Palpable crepitus due to soft tissue gliding

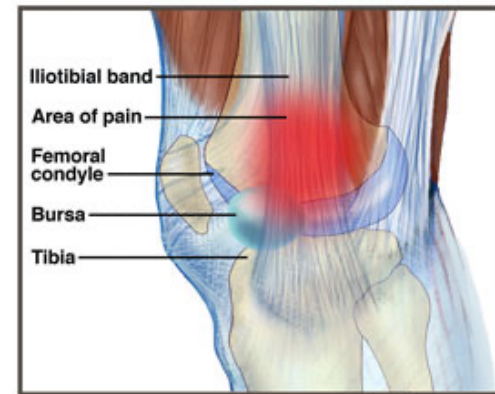
Diagnostic Tools:

- **Imaging:** Plain X-rays, CT for impingement sources
- **Ultrasound-Guided Injections:** Aid precise diagnosis

Treatment Options:

- **Extruded Cement/Osteophytes:** Removal and partial ITB release at crepitus/tenderness site
- **Lateral Tibial Tray Overhang:**
 - Prevention: Palpate lateral cortical rim during sizing
 - Cut off of 3 mm lateral tibial tray overhang
 - Combine arthroscopic and open approaches

Iliotibial Band Syndrome



ITB TRACTION Syndrome →



Definition

- New condition associated with Bi-cruciate Stabilized (BCS) TKA
- Caused by **abnormal ITB stretching** due to forced guided motion of the implant

Clinical Presentation:

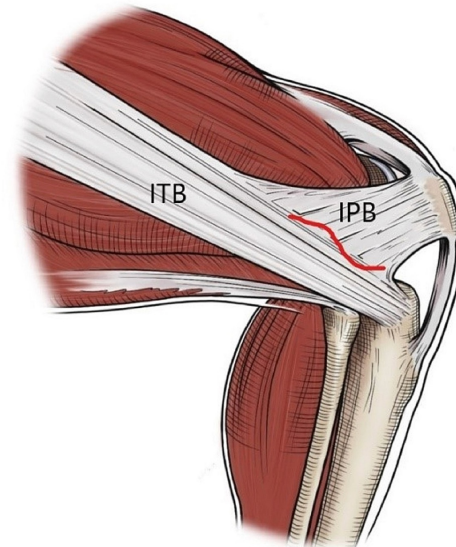
- Increased pressure on ITB
- lateral knee pain between 20°-70° ROM

Diagnostic Tools:

- **Local Anesthetic Injection (± Steroids):** Confirms pain source and aids surgical decision-making

Treatment:

- **Conservative Management:** Physical therapy, injections
- **Surgical:** Release of iliopatellar retinaculum from ITB for persistent symptoms
- **Second-Generation BCS Knee (2011):** Improved design reduced lateral knee pain incidence (1.9%)



BICEPS TENDINITIS



Clinical Overview:

- Rare cause of lateral knee pain post-TKA
- Commonly observed in native knees but uncommon after TKA

Case Reports > [J Arthroplasty](#). 2009 Dec;24(8):1292.e15-8. doi: 10.1016/j.arth.2009.01.025.

Epub 2009 May 5.

Biceps tendinitis as a cause of acute painful knee after total knee arthroplasty

[Dilbans Singh Pandher](#)¹, [Randhir Singh Boparai](#), [Rajesh Kapila](#)

Clinical Presentation:

- Severe posterolateral knee pain 21-45 days post-TKA
 - **Posterior** compared to ITB-related pain
 - **Lateral** compared to popliteal tendinitis
- Localized tenderness along biceps tendon

Diagnostic Tools:

- **Ultrasound:** Confirms diagnosis by visualizing fluid and tendon pathology
- Ultrasound-guided peritendinous lidocaine injections

Treatment Considerations:

- Conservative management is often effective
- Injections and anti-inflammatory medications for symptom relief

FABELLA SYNDROME



Clinical Presentation:

- Insidious onset of posterolateral knee pain.
- Pain localized medial to the biceps femoris.
- Snapping or clicking sounds during knee movement

Risk Factors: Fabella length ≥ 1.0 cm,
Incorrect component placement, Ligament instability.

Diagnostic Considerations:

- Evaluate for intraarticular pathology (e.g., popliteus tendon impingement) via arthroscopy.

Treatment: = Fabellectomy:

- Performed through a separate posterolateral incision.
- Combined with arthroscopic evaluation to exclude other conditions.

Mechanism in TKA:

= Impingement between fabella and:

- Posterolateral edge of femoral component.
- Posterior edge of polyethylene component



SYNOVIAL TISSUE IMPINGEMENT →

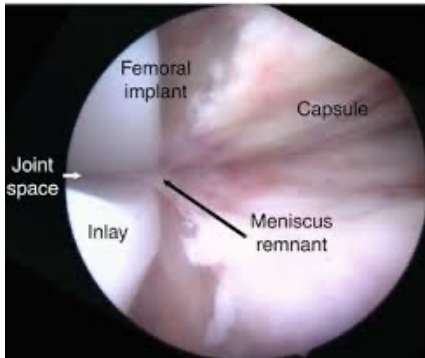


Diagnosis: Often a diagnosis of exclusion.

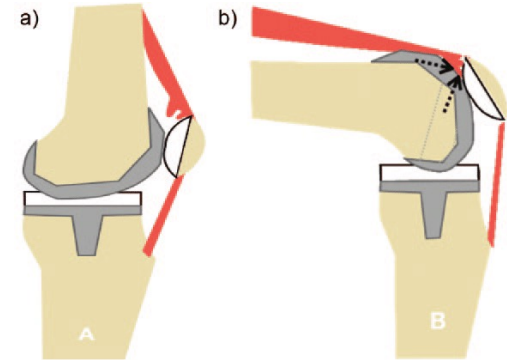
- isolated anterior or lateral knee pain:
- Negative imaging or rarely visible on MRI.
- Failed non-operative management.

Treatment

Arthroscopy revealed excessive synovial tissue causing impingement.



Overview = Impingement reported in anterior and lateral aspects of the knee.



POPLITEUS TENDON IMPINGEMENT →



Clinical Presentation:

- Pain and snapping sensation along posterolateral knee during flexion/extension.

Diagnosis:

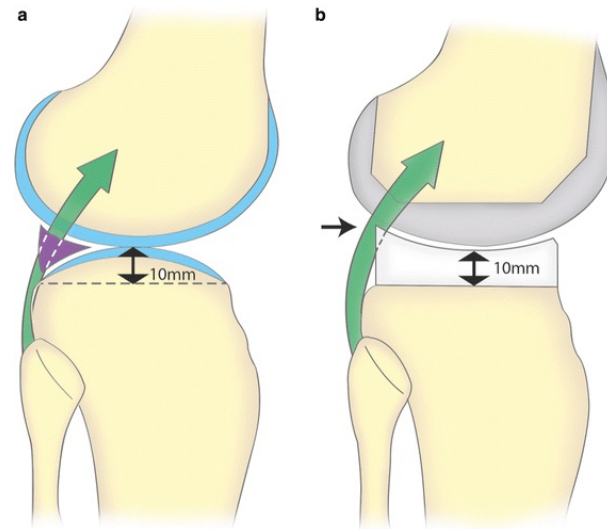
- **Dynamic US:** Demonstrates implant-tendon relationship.
- **Ultrasound-Guided Injections:** Local anesthesia relieves symptoms, confirming diagnosis.

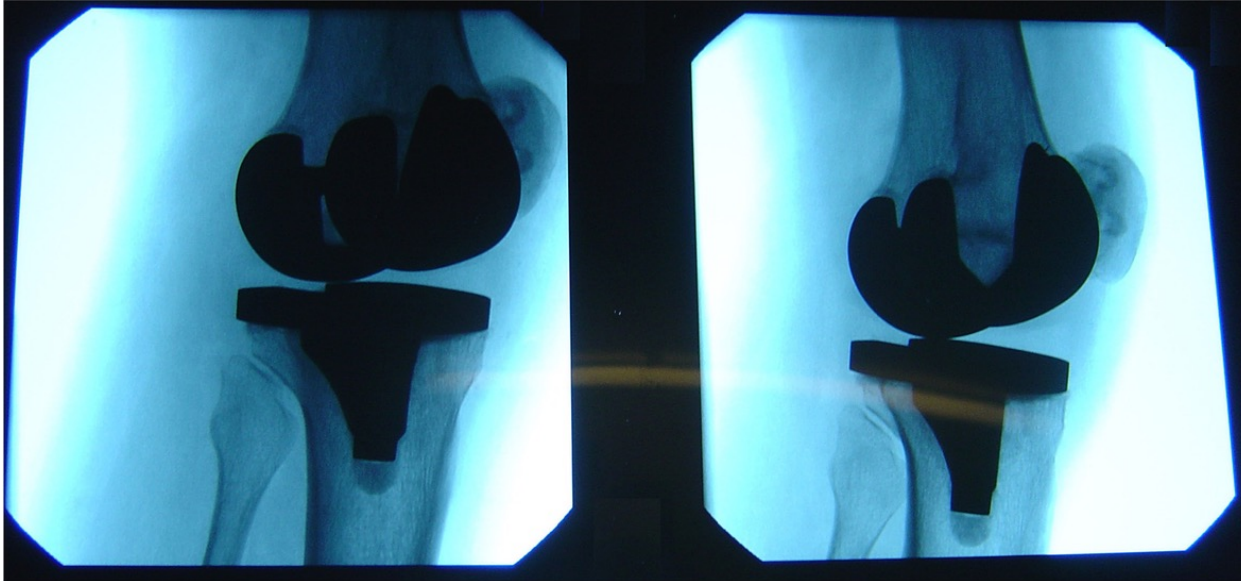
Treatment Options:

- **Non-Operative:** NSAIDS, Physical therapy.
- **Surgical:** Arthroscopic complete tenotomy .


Mechanism: Tendon impingement caused by:

- Excessively lateralized femoral component.
- Overhanging posterolateral lip of the PE insert
- Unresected osteophytes.





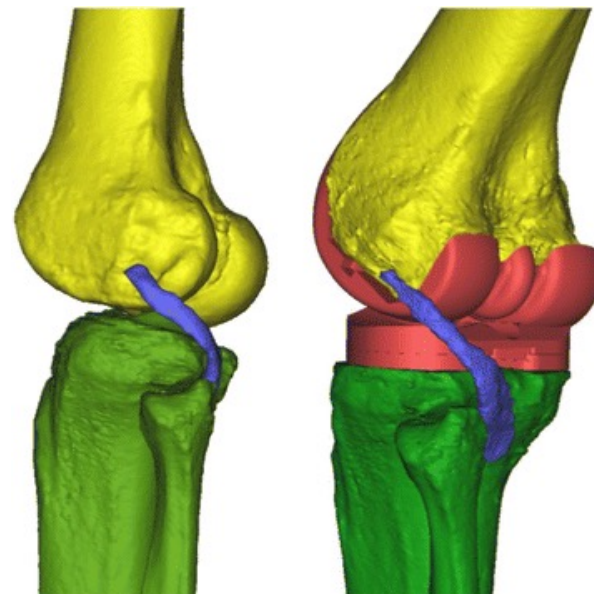
Tibial component overhang confirmed on dynamic fluoroscopy in a patient with popliteal tendon impingement

► Knee Surg Sports Traumatol Arthrosc. 2016 Sep 26;25(6):1720–1730. doi: [10.1007/s00167-016-4330-8](https://doi.org/10.1007/s00167-016-4330-8) 

Popliteus impingement after TKA may occur with well-sized prostheses

[Michel P Bonnin](#)^{1,2,✉}, [Arnoud de Kok](#)³, [Matthias Verstraete](#)³, [Tom Van Hoof](#)³, [Catherine Van der Straten](#)³, [Mo Saffarini](#)⁴, [Jan Victor](#)³

A **well-sized tibial component** modifies popliteal tracking, while an undersized tibial component maintains more physiologic patterns. Oversizing shifts the popliteus considerably throughout the full arc of motion. This study suggests that **both femoro- and tibio-popliteus impingements** could play a role in residual pain and stiffness after TKA.

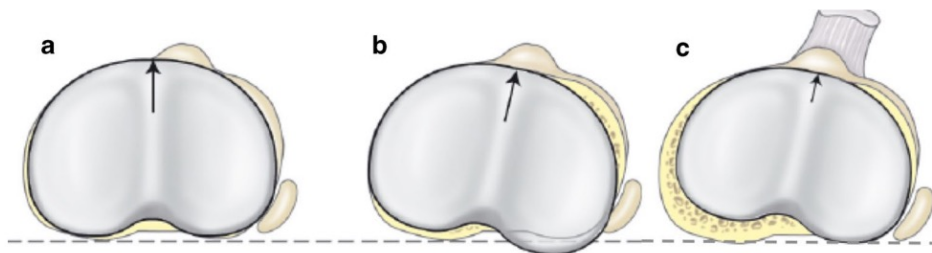


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Emmanuelle Dantony^{4 5 6}



- **Posterior alignment:** Good coverage but risks overhang if adjusted for ATT.
- **ATT alignment:** Posterolateral overhang; medial/anterior loss of coverage.
- **Undersizing:** Avoids overhang but reduces mediolateral coverage and risks femoral-tibial mismatch.

PAINFUL TKA due to Oversized implants or Implant Malposition

- **ANTERIOR impingement:** patellar tendon impingement

-> decreased functional outcomes (pain, KOOS)

- **MEDIAL impingement:**

-> decreased knee flexion



- Medial overhang (cut off=3mm): if >3mm revision
- medial cement protusion: remove

- **LATERAL impingement:**



- ITB friction syndrome
- ITB traction syndrome
- Biceps tendinitis
- Fabella syndrome
- Synovial tissue impingement
- Popliteus tendon impingement