

sports medicine
excellence group

sports clinic
Hannover | Innsbruck

Multiligament Injuries

Clinical examination and imaging

Christian Fink



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Multiligament Injuries

- Acute vs chronic
- Associated injuries

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History

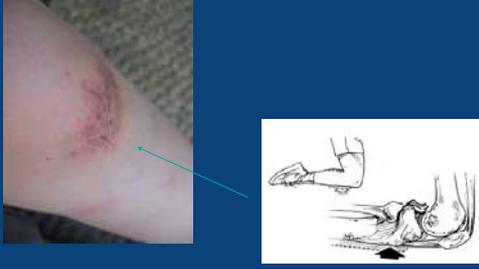
Injury Mechanisms

- HIGH ENERGY TRAUMA
- CONTACT VERSUS NON CONTACT
- HYPEREXTENSIONS Injury



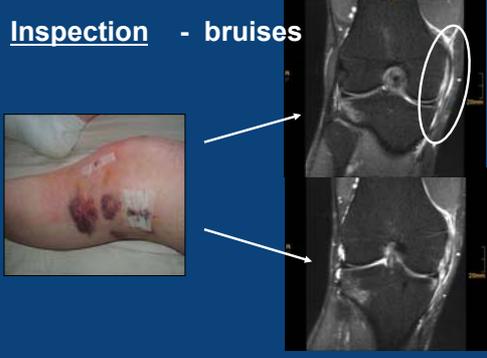
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Inspection - bruises



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Inspection - bruises



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Inspection - swelling, effusion



Definition: KNEEDISLOCATION

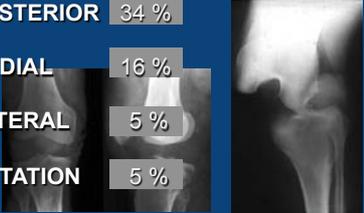
(3 oder more stabilizing structures)

- ACL/PCL
- MCL/LCL
- „Postero medial/lateral corners“



KNEEDISLOCATION

- ANTERIOR 40 % (Hyperextension)
- POSTERIOR 34 %
- MEDIAL 16 %
- LATERAL 5 %
- ROTATION 5 %



Complications

**Vascular – Nerv Injuries
Compartmentsyndrom**

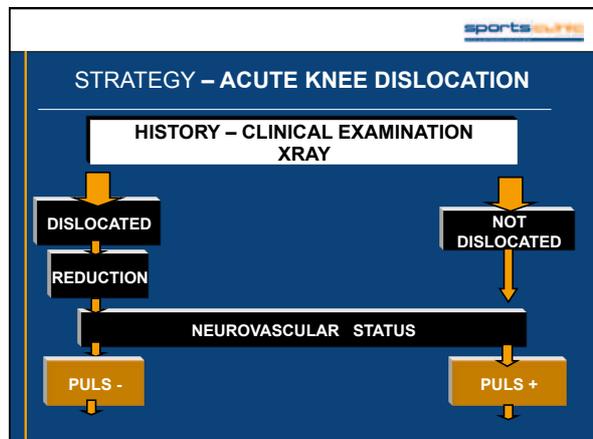
Vascular Injuries

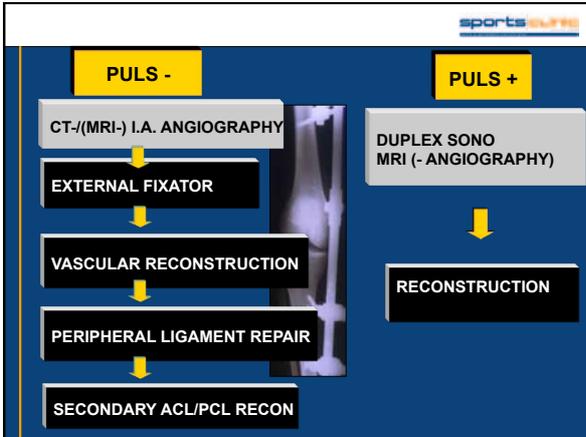
- MANTKE R Akt TRAUMAT 31,2 %
- KENDALL RW J Trauma 16 %
- TREMANN GS Arch SURG 23 %
- KAUFMANN SL RADIOL 32 %
- ESSKA Multicenter Study 7,7 %

Nerve Injuries

- ALMENKINDER LC Clin ORTHOP 16 %
- SISTO DJ Clin ORTHOP 40 %
- ESSKA Multicenter Study 15%

→ DORSAL DISLOCATION!!



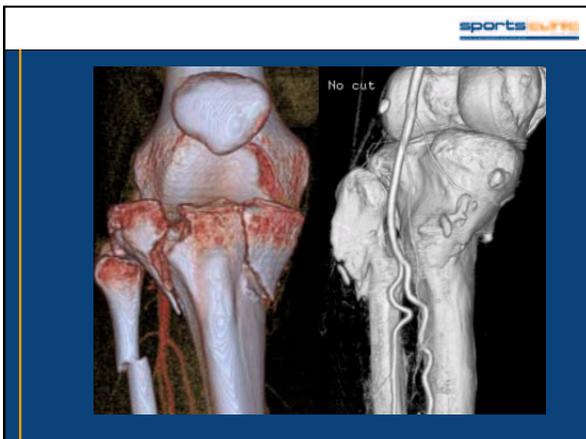
ANGIOGRAPHY

"CLASSIC"

MR

CT

CAVE: Intimal lesions



Functional assessment

Patient lying supine

- ACL - Lachman, anterior drawer, pivot shift
- PCL - posterior drawer, sag sign, (reversed ps)
- MCL - valgus stress (full extension, 30° flexion)
- LCL - valgus stress (full extension, 30° flexion)

Functional assessment

Rotatory instability

Combinations of test

- anterior drawer (int – external rotation)
- posterior drawer (int – external rotation)

Functional assessment

Patient prone

External rotation in 20°

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Functional examination under Fluroscopy

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Functional examination under Fluroscopy

--- extremely helpful for surgical planning

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MRI

SOFT TISSUE TRAUMA –
Fluid loss during arthroscopy – Compartment Syndrom

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MRI

Location of ligament rupture

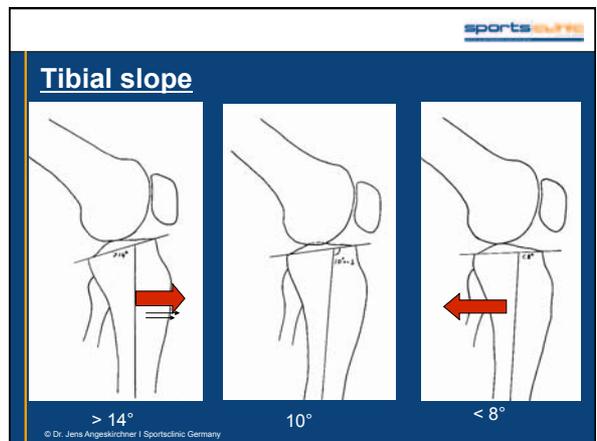
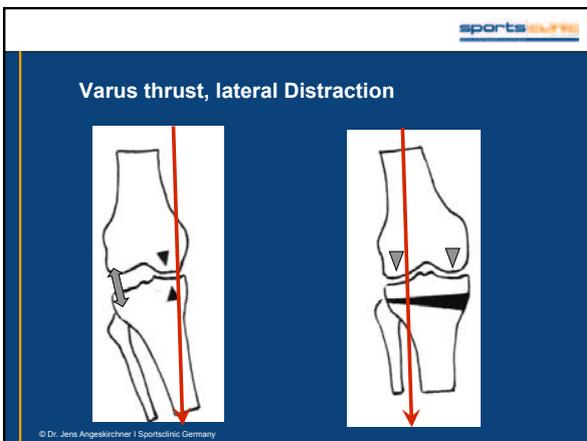
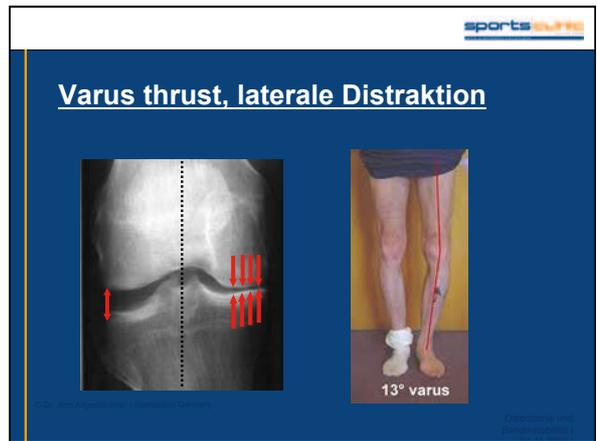
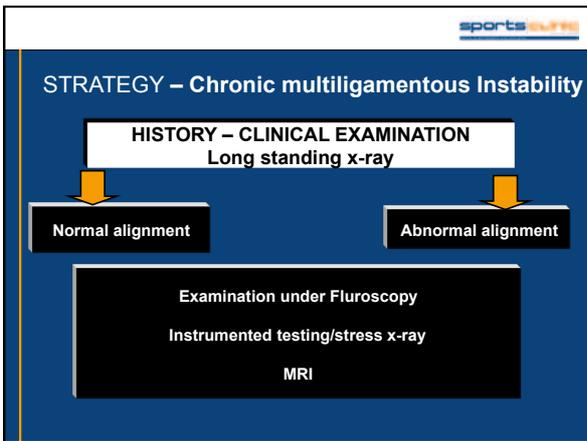
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MRI

does not tell you anything about stability

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„open“ Knee dislocation



Summary: Clinical examination

- **Acute:** Neurovascular status – repeatedly
- Inspection (bruises/swelling/effusion)
- Stability

Summary: Clinical examination

- **Chronic:**
 - alignment and tibial slope
- Stability
 - All tests – rotational Components (Fluoroscope)

Summary: Imaging

(a matter of availability)

- Ultrasound, Angiography - vascular Status
- CT angiography – bony components + vascular
- MRI (Angiography) – ligaments, cartilage and meniscus
- X-ray (acute- dislocation?, chronic- alignment)

THANK YOU!

