

Should we resurface the patella in TKA?

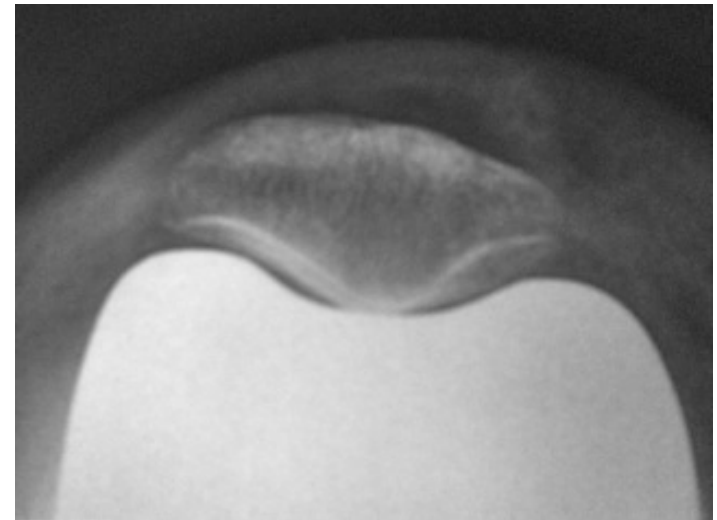
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V.Guinet, A.D'Autru
LH university France



6th Advanced Course on Knee Surgery

January 31st – February 5th, 2016 Val d'Isère - France

Controversial topic

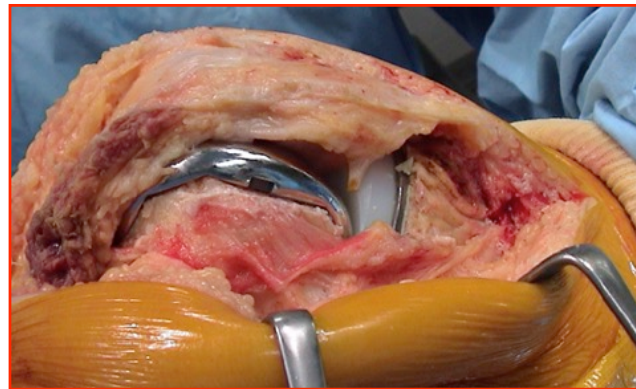
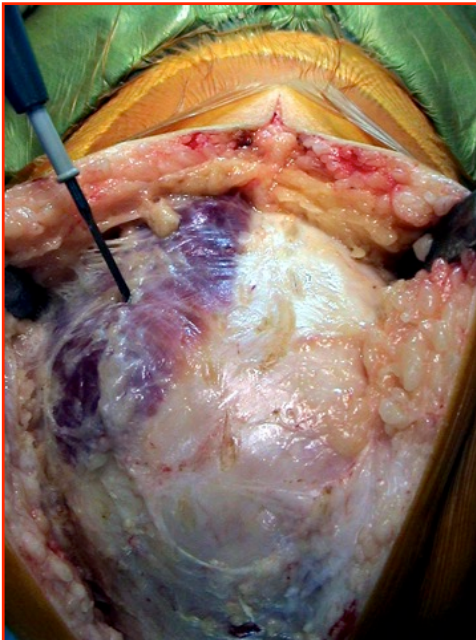
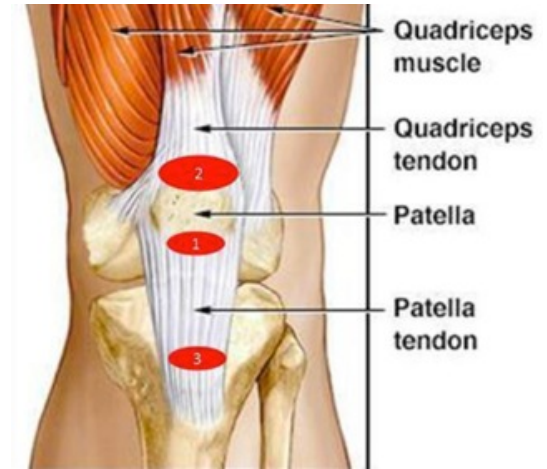


The literature

Study	Nb	FU	prospective randomize	Significant diff
Mayman D, Bourne RB, Rorabeck CH, Vaz M, Kramer Journal Arthroplasty. 2003	100	8 to 10	Yes	No Difference
Burnett RS, Haydon CM, Rorabeck CH, Bourne RB Clin Orthop Relat 2004	90	10	Yes	No difference
Waters TS, Bentley G. J Bone Joint Surg Am. 2003	474	5	Yes	Different
Liu ZT, Wu YL, Li XT, Wu HS Aug 2007	60	4,5	Yes	No difference
Barrack RL, Wolfe MW, Waldman DA, Milicic M, Bertot AJ, Myers L. J Bone Joint Surg Am. 1997	118	2,5	Yes	No difference
Patel K, Raut V. Int Orthop. 2011	60	4	Yes	Difference

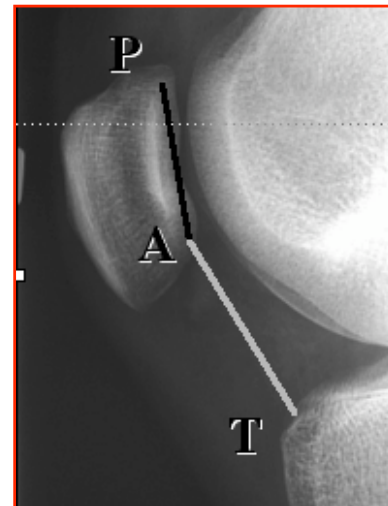
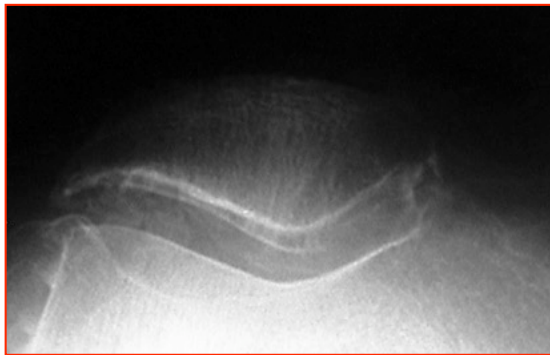
Most cases: Mid vastus?

- More stable for the patella
- But keep the fat pad



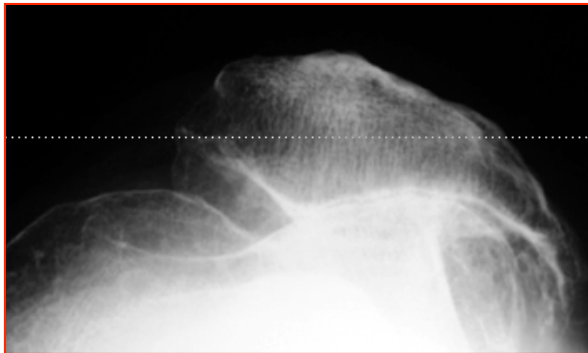
Use mid-vastus if :

- No sub-luxation on Merchant view
- No patella bara
- Even in valgus knee (reducible)



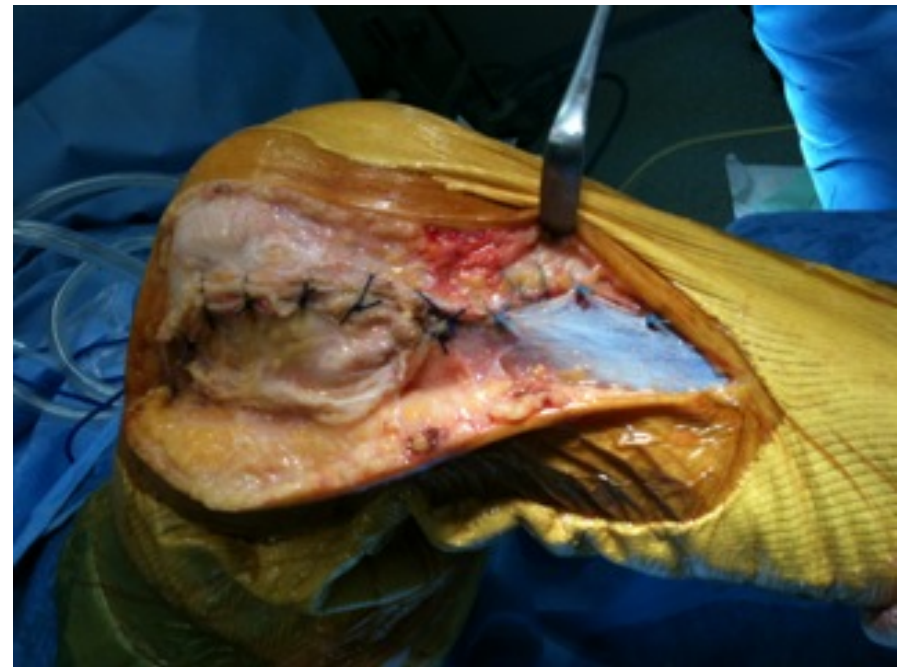
Use a lateral approach if :

- Patella sub-luxation
- Patella bara
- Even in a Varus Knee !

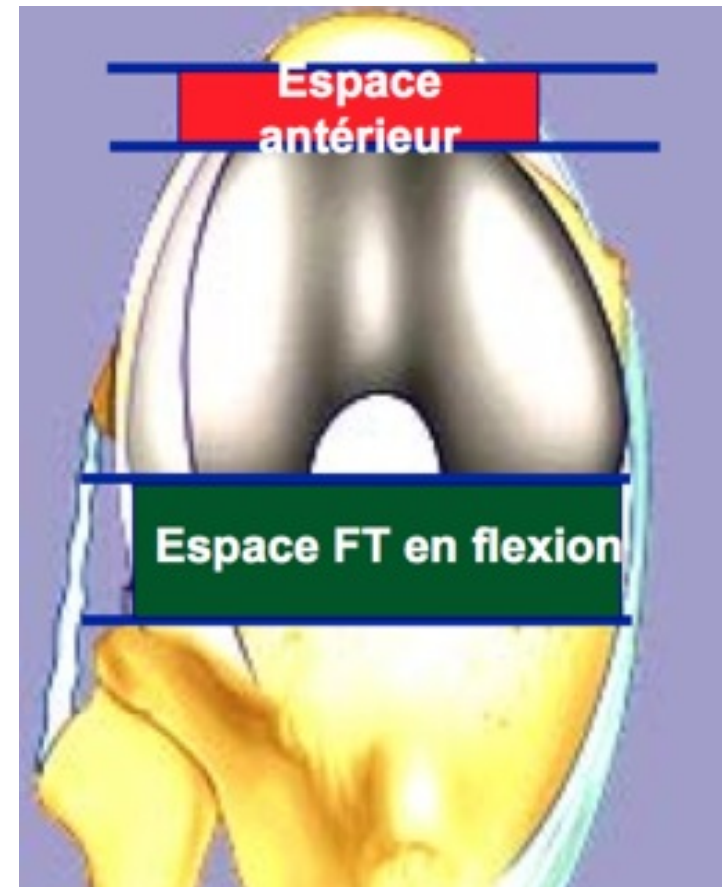
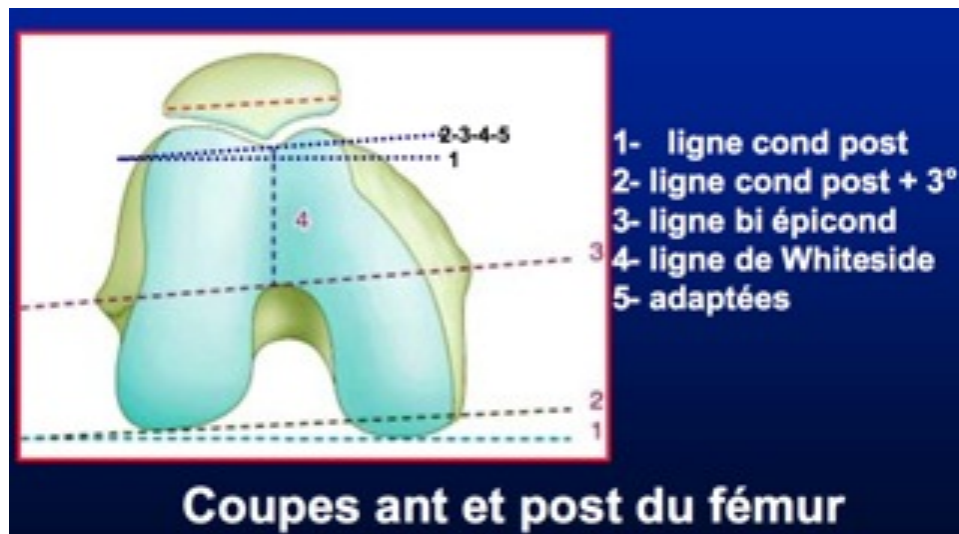


The lateral approach

- Release the lateral retinaculum, osteophyte
- Security +++ patellar tendon
- No screw

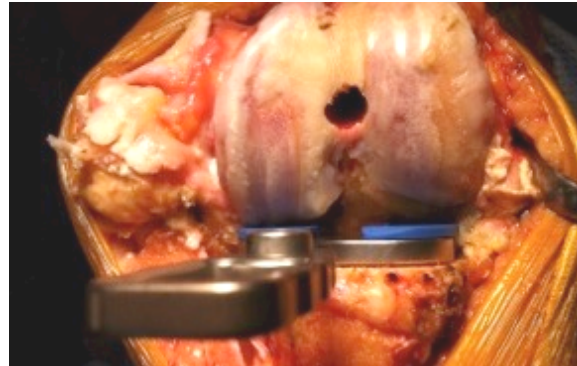
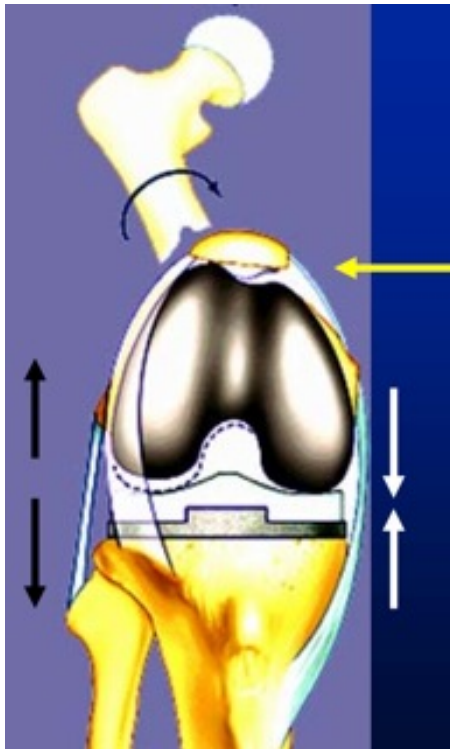


The femoral rotation



With the instrumentation!

- Easy to do!



Of course trochlea shape +++



1992, 1995

HLS 2, HLS évolution

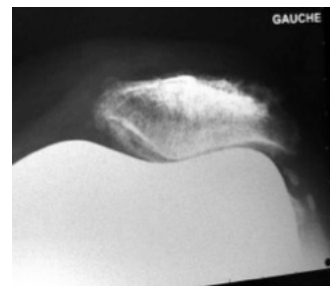
2002

Noetos

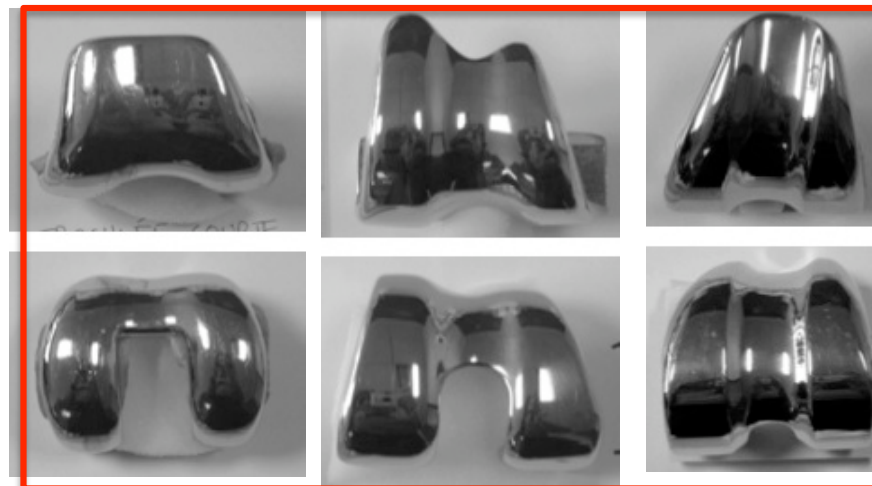
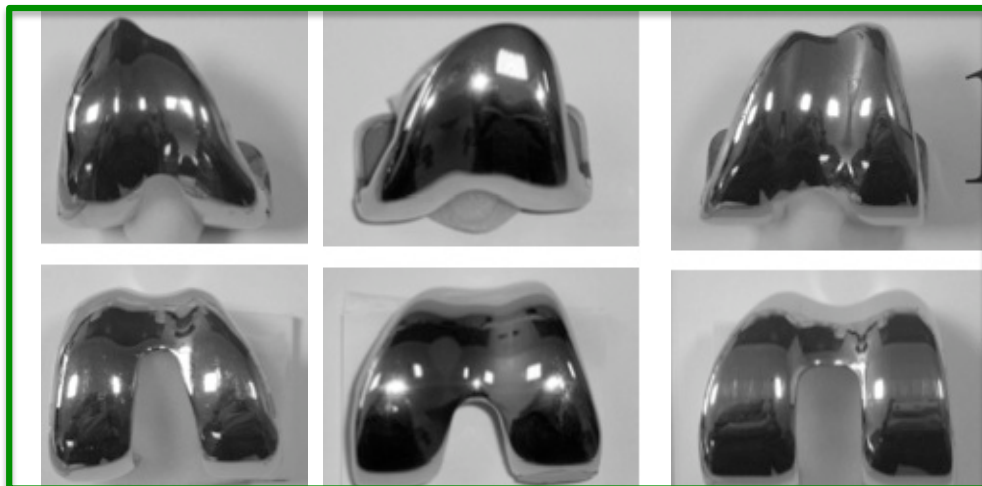
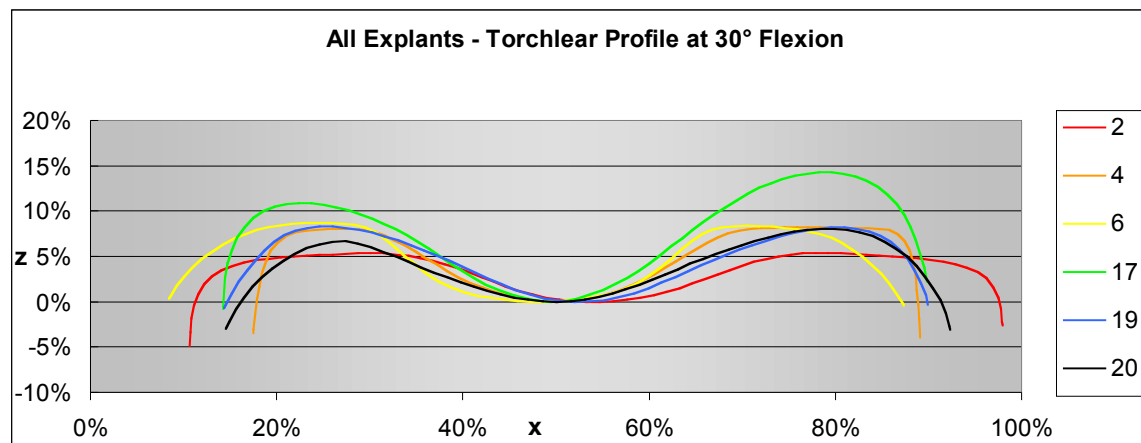
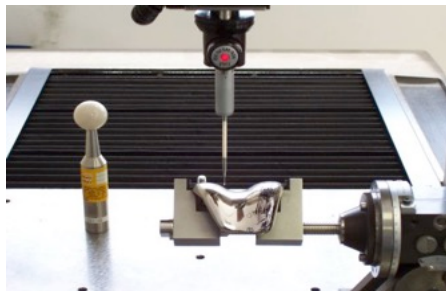


2010

Kneetec



Anatomic or not



The trochlea

- For a dome implant & native patella
- Lateral 7 °
- Constant radius
- Lateral elevation

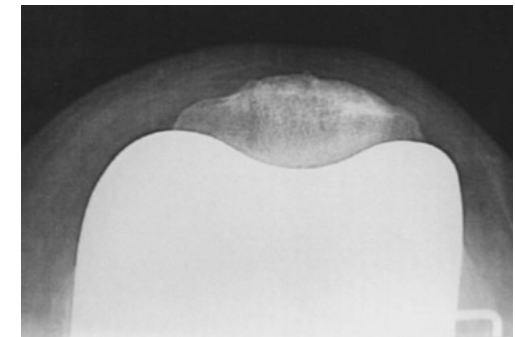




Our Study: patella fitting

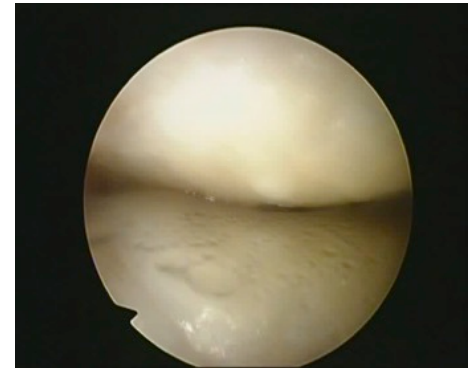
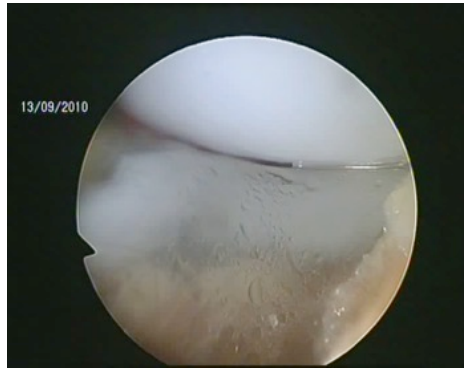
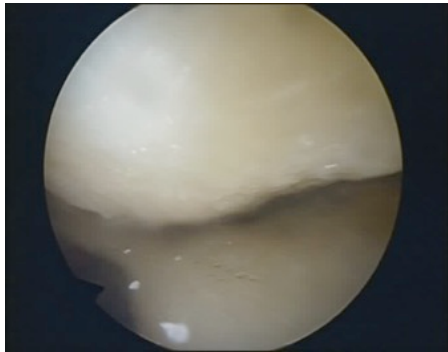


- 30 patients
- Arthroscopic control at 30° flexion
- Without water

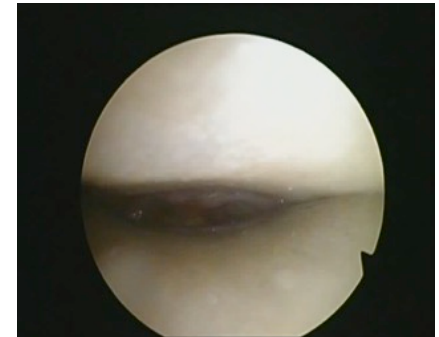
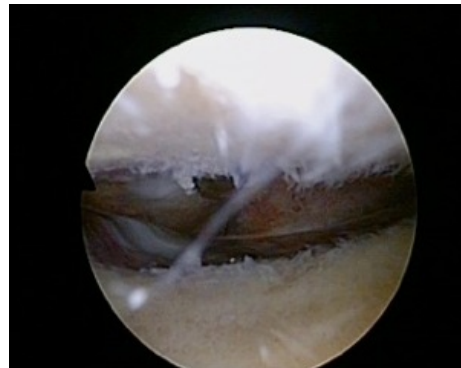


X ray and arthroscopic analyses

- Well congruent

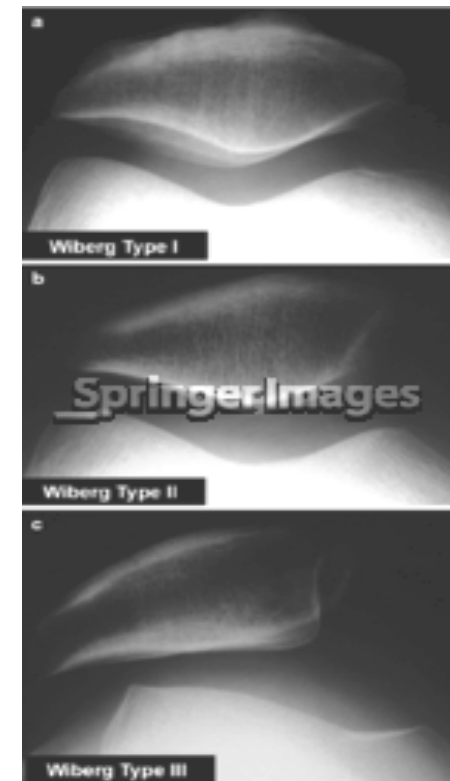
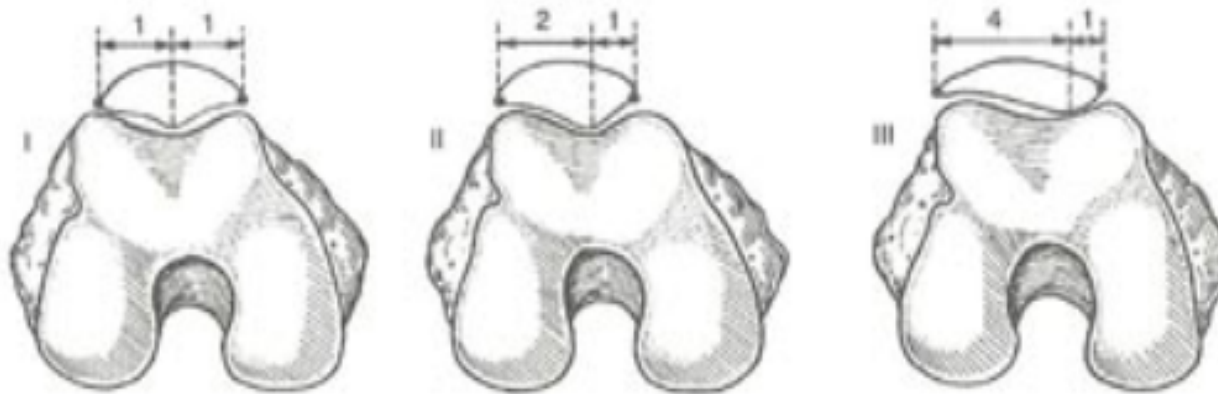


- Miss congruent



Results

- 12 patients are well fitted (congruent)
- 5 patients are miss fitted (Wiberg 3)
- Patellar Shape +++++



At one year

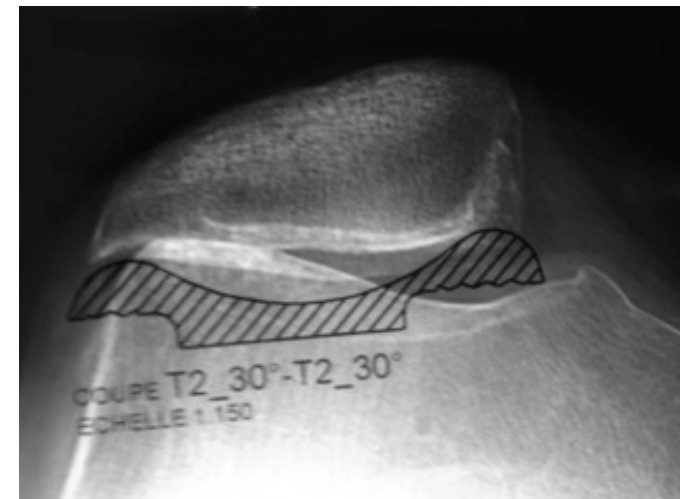
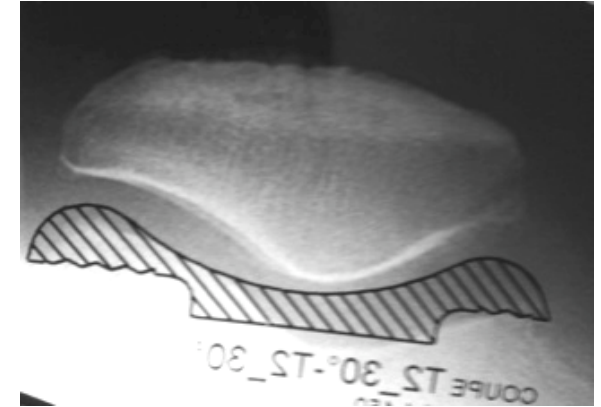
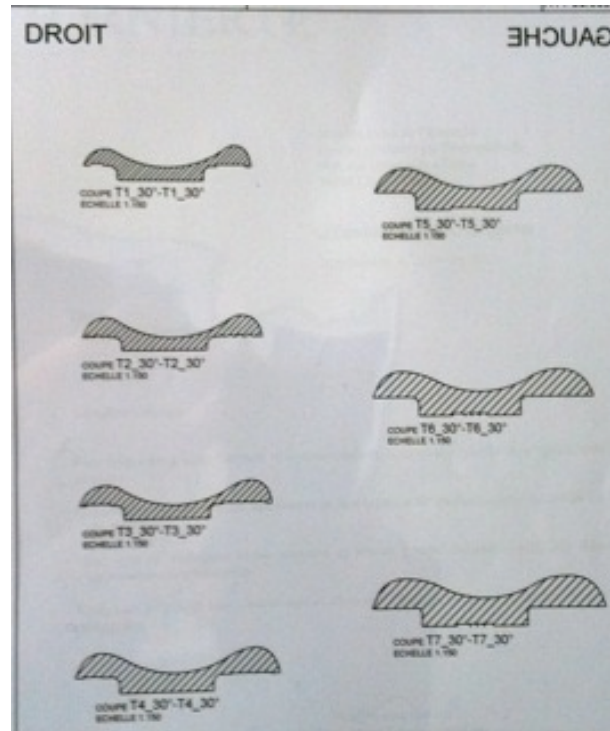
	Wiberg 1 =4/17	Wiberg 2 =8/17	Wiberg 3 =5/17
Congruent = 12/17	4	6	2
Non-congruent = 5/17	0	2	3

	Patellofemoral pain	Absence of patellofemoral pain
Congruent 12	1	11
Non-congruent 5	3	2

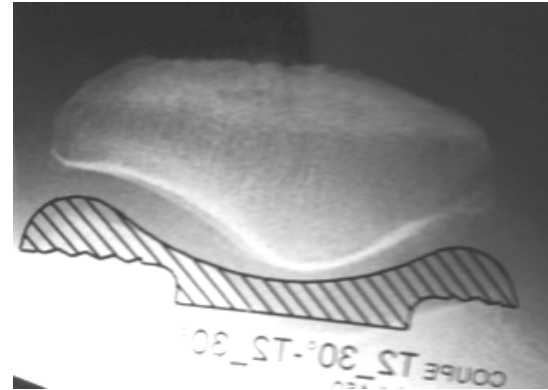
	Knee Society score	Satisfaction
Congruent patellae = 12	45; 58; 78; 81; 70; 83; 78; 64; 76; 67; 68; 71 Mean = 69.91	5 "very satisfied" 5 "satisfied" 2 "not very satisfied"
Non-congruent patellae = 5	33; 38; 75; 42; 45 Mean = 46.6	1 "very satisfied" 2 "not very satisfied" 2 "dissatisfied"

P=0,02

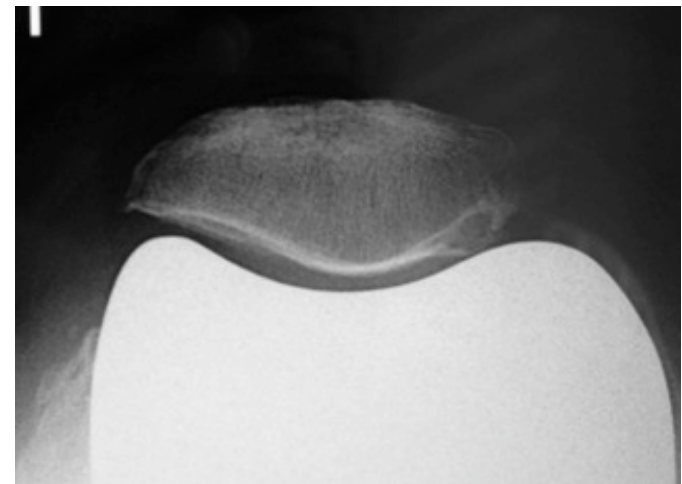
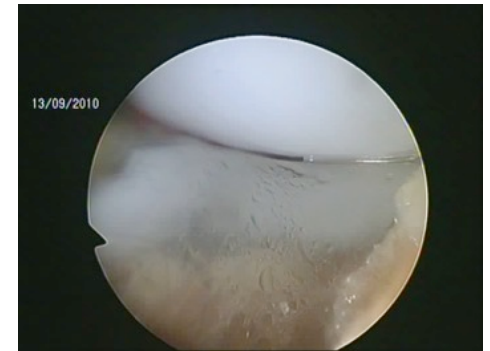
In everyday life !



Congruent

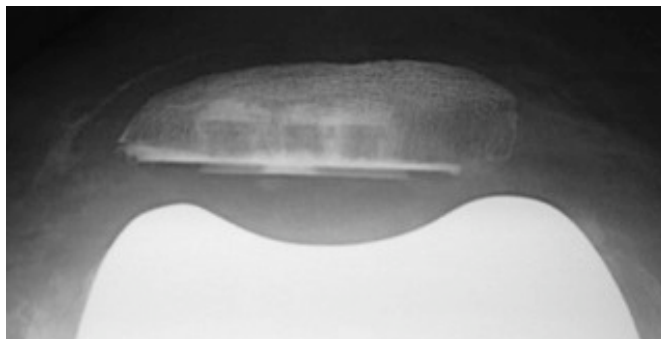
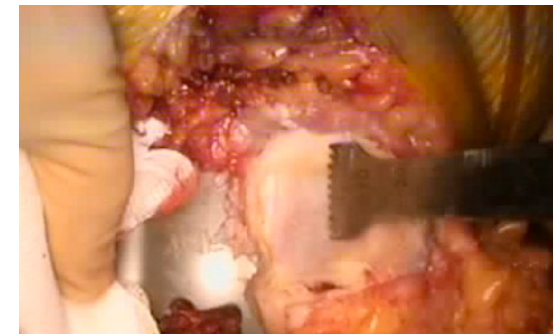
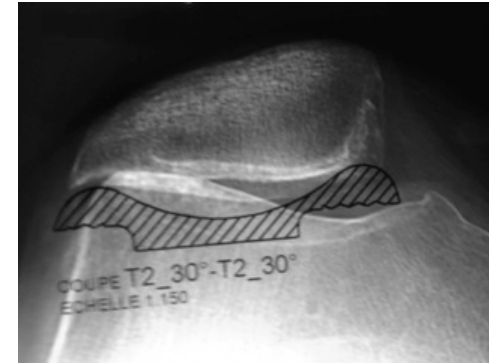


- You can live the native Patella but ...
 - Take care of the approach choice
 - Leave the « fat pad »
 - Take care of femoral rotation



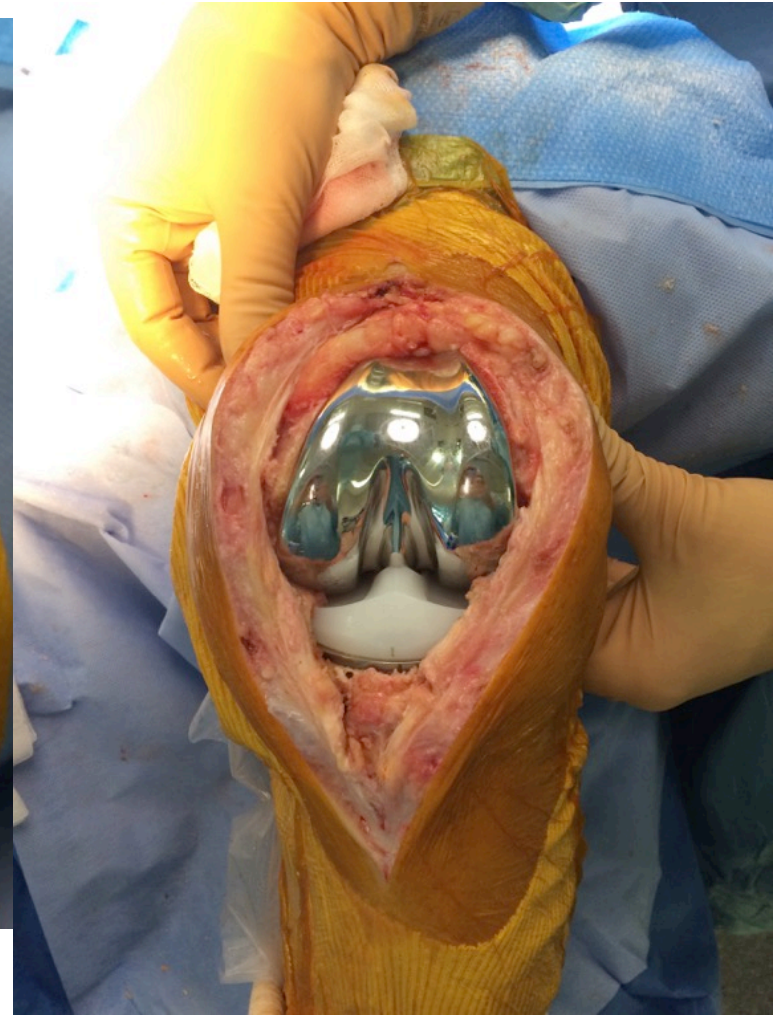
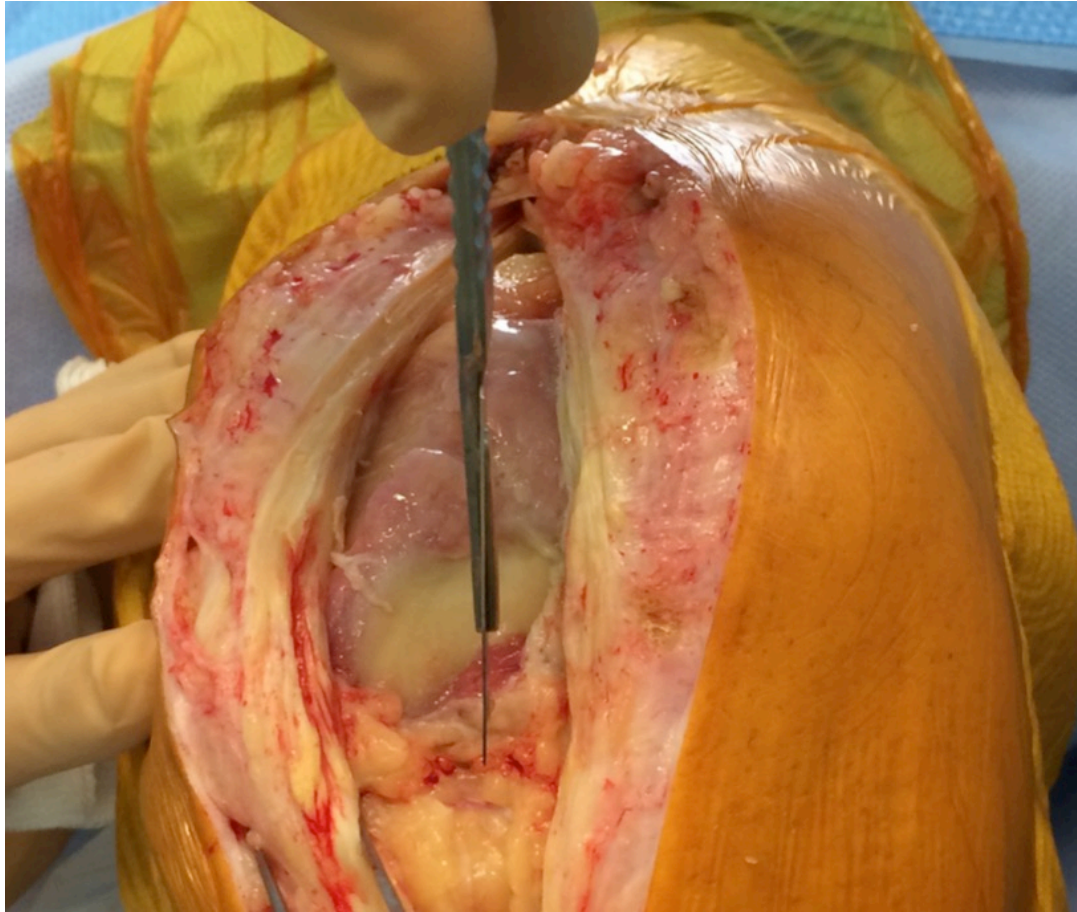
No congruent

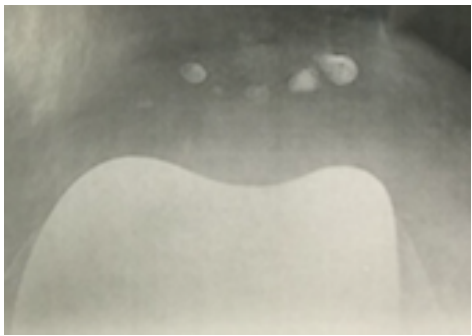
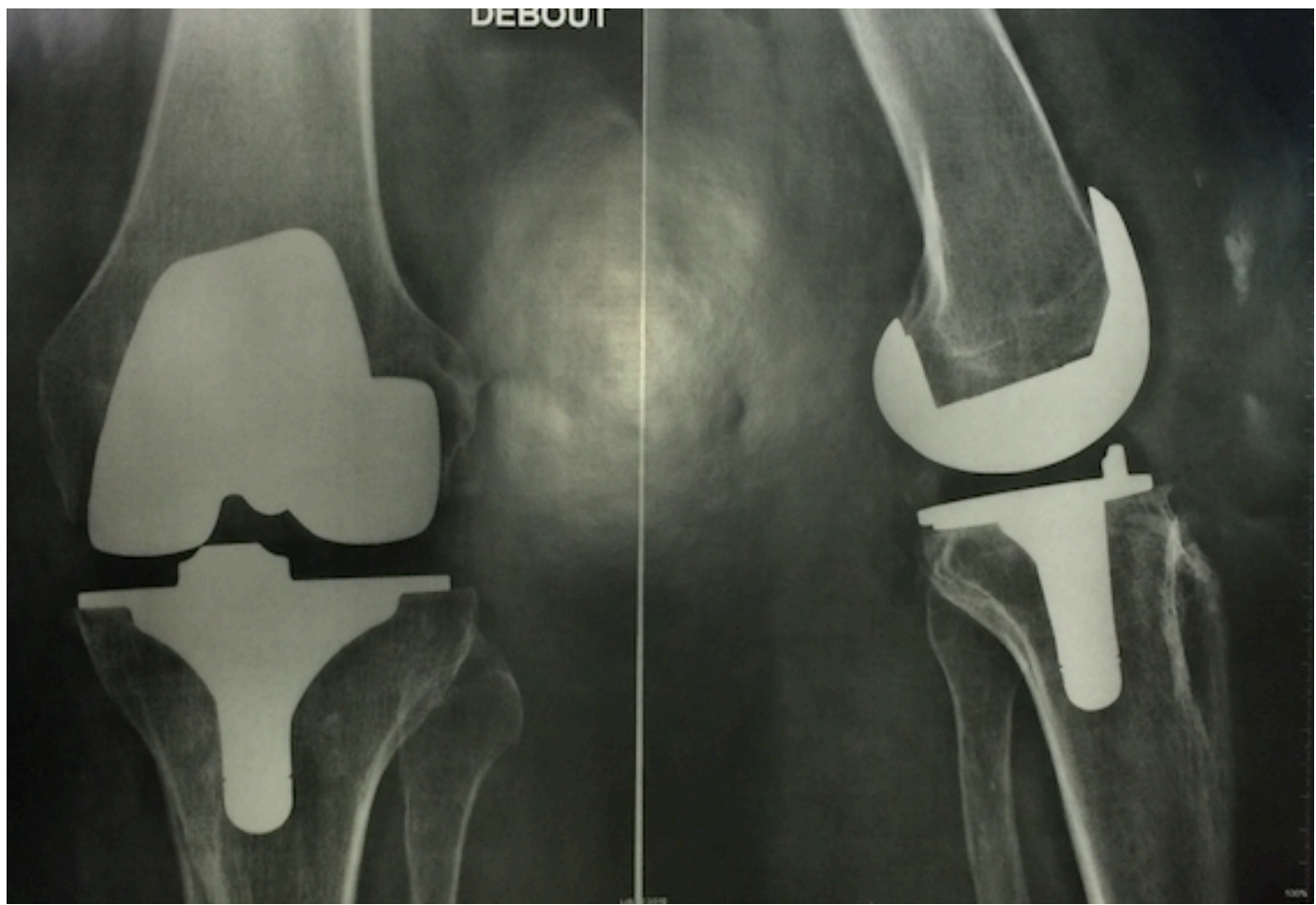
- You can make a patella plasty
- Or a patella resurfacing
 - Take care of the approach choice
 - Take care of femoral rotation
 - And also the patella cut !



What to do in this case ?

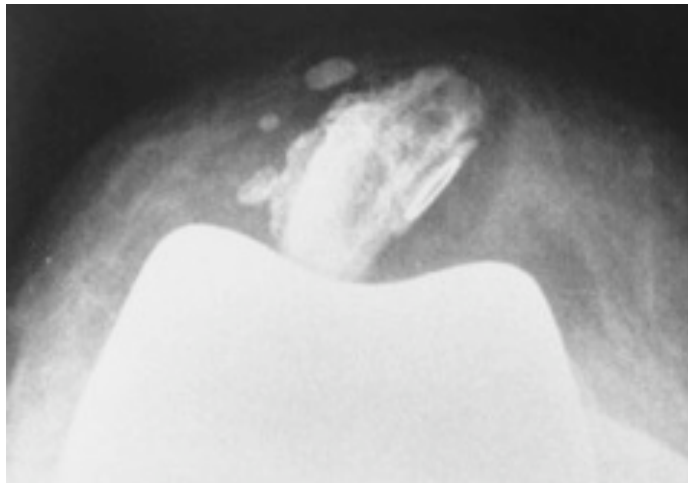






Take care of the patella !

Thank you





 **SFA**
2016

NOVEMBER 30th
> DECEMBER 3rd

PARIS

PORTE DE VERSAILLES

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CONGRESS PRESIDENTS: Philippe BEAUFILS
& Versailles Arthroscopy team



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Simultaneous translation
French/ English

SYMPOSIA

SHOULDER POSTERIOR INSTABILITY

A. Godenèche and P. Mansat

ANTERO LATERAL TENODESIS OF THE KNEE

P. Imbert and D. Saragaglia



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