**ABSTRACT FORM**

***Meeting of the International***

## Patellofemoral Study Group

*Helsinki Finland Aug 3-6. 2022*

 **DEADLINE: April 15, 2022**

AUTHOR, CO–AUTHORS(underline name of presenter)

INSTITUTION

TITLE OF ABSTRACT

AUTHOR, CO–AUTHORS(underline name of presenter)

Kanto Nagai, Shu Watanabe, Takehiko Matsushita, Ryosuke Kuroda

INSTITUTION: Department of Orthopaedic Surgery, Kobe University Graduate School of Medicine, Kobe, JAPAN

TITLE OF ABSTRACT:

CLINICAL OUTCOMES OF MEDIAL PATELLOFEMORAL LIGAMENT RECONSTRUCTION USING SUTURE ANCHORS IN SKELETALLY IMMATURE PATIENTS WITH RECURRENT PATELLAR DISLOCATION

ABSTRACT:

**Background:** Surgical procedures for skeletally immature patients with recurrent patellar dislocation have not yet been established. The purpose of the present study was to assess clinical outcomes of medial patellofemoral ligament (MPFL) reconstruction using suture anchors in skeletally immature patients with recurrent patellar dislocation.

**Methods:** Thirteen knees of ten skeletally immature adolescents (age, 14±2 years; M/F: 5/8) with recurrent patellar dislocation were enrolled (mean follow-up: 4.1± 1.8 years). The patients underwent MPFL reconstruction using hamstring autograft with suture anchors for both patellar and femoral graft fixation. The rate of re-dislocation, patellar apprehension sign, and growth disturbance, as well as the Crosby-Insall grading system were assessed at the final follow-up. The pre- and post-operative Kujala score were compared. As radiographic paramenters, the Insall-Salvati ratio, Caton-Deschamps index, patellar tilt, and congruence angle were measured and compared before and after the surgery.

**Results:** No obvious growth disturbance was found in all knees. The re-dislocation occurred in one knee (7.7%). Patellar apprehension sign remained in two knees (15.3%) after the surgery. The mean Kujala score significantly improved from 77.2 to 98.2 (p < 0.01). The Crosby-Insall grades were excellent in eight knees (61.5%) and good in five knees (38.5%) at the final follow-up. The significant improvements were oberseved after the surgery in patellar tilt (17.9° to 14.6°) and the congruence angle (15.0° to 1.9°) compared to the pre-operation (p < 0.05).

**Conclusions:** MPFL reconstruction using suture anchors could be a choice of treatment in skeletally immature patients with recurrent patellar dislocation.

**Guidelines for submission of Abstract**

#### INFORMATION FOR AUTHORS AND GUIDELINES FOR PRESENTATION

* **Final abstracts must be submitted on this original official abstract form and written in English. Deadline April 15, 2022**.
* Authors will be informed of the committee’s decision by May 15, 2022
* Abbreviations are allowed but must be clearly defined
* The entire abstract text, including title, author(s) and institution should be contained within the respective rectangular spaces
* Capitalize the entire TITLE
* You may submit more than one abstract but generally should only expect at most one accepted for podium presentation. Other abstracts may be published on our website as has been done previously.
* On site presentations will be **STRICTLY LIMITED TO 5 MINUTES PER PAPER**.

Return the abstract form by email to wpost@wvortho.com and it will be distributed to the program committee for review.