Incidence Of Impingement Lesions And Chondral Defects In Chronic Lateral Ankle Instability

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My disclosure is in the Final AOFAS Program Book. I have no potential conflicts with this presentation.
Introduction

• Lateral Ankle ligament injury are common

• Persistent anterolateral pain is associated in 20-40% of cases\(^1\)

• Associated injuries in chronic instability\(^2,3,4\)
  ▫ Anterolateral impingement
  ▫ Ankle synovitis
  ▫ Chondral lesions
  ▫ Peroneal tendon pathology
Aim

• To determine the incidence:
  ▫ Ankle synovitis,
  ▫ Anterolateral impingement
  ▫ Osteochondral lesions
  ▫ Or other associated lesions

• In a group of patients with functional and chronic lateral ankle instability
Materials and Methods

• Retrospective study over 10 year period

• Inclusion criteria:
  ▫ All patients undergoing arthroscopic joint evaluation and lateral ligament reconstruction complex using the modified Brostrom Gould repair

• Exclusion criteria:
  ▫ Patients with previous ankle surgery
  ▫ Revision reconstruction
  ▫ Inflammatory arthropathy
Results

• 100 patients

• Female:Male: 53:47

• Mean age: 37.2 years (range 15-65 years)
Results

• Soft tissue Anterior Lateral Impingement lesions: 63 patients

• Diffuse hypertrophic inflamed synovium in multiple areas: 3 patients

• Bony impingement lesion: 8 patients

• Osteochondral lesion: 16 patients
  ▫ Lateral talar dome: 8 patients
  ▫ Medial talar dome: 8 patients
Surgery

- Repair of ATFL: 100 patients
- Repair of ATFL and CFL: 72 patients
- Tubularization of peroneus brevis: 2 patients
- Microfracture: 2 patients
Surgical Outcome and conclusion

- Most patients satisfied but:
  - 3 patients required revision procedures for instability
  - 2 patients developed CRPS
  - 2 patients on going anterior lateral pain

In patients with symptomatic chronic functional instability there is a:

- High incidence of anterior lateral intra-articular synovitis requiring debridement
- Low incidence of bony impingement lesion
- Low incidence of osteochondral lesions

Arthroscopy and Lateral Ligament reconstruction is safe and has a low co-morbidity
References