• **Title:**
Arthroscopic treatment of the posterior ankle impingement, 24 patients follow-up.

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My disclosure is in the Final AOFAS Mobile App. I have no potential conflicts with this presentation.
GOALS

• Describe the clinical evolution in the patients with ankle posterior impingement syndrome treated by arthroscopy
Surgical Technique

- Prone position
- Posteromedial and posterolateral portals
- Non distraction
- Non fluid pump
- Clasical 4.5 mm arthroscope
Materials and Methods

- Prospective study
- 24 patients between 2007 to 2012 treated by ankle arthroscopy with diagnostic of posterior ankle impingement
- Follow-up average 17 months
Materials and methods

• Variables analized:
  – CLAS sport level activity
  – AOFAS for ankle
  – SFMCP score for ankle
  – Arthroscopic findings
  – Time to return sport (same level)
  – Linkert scale for patient satisfaction.
Analysis of the results

Table 1. Baseline characteristics of patients undergoing posterior ankle arthroscopy

<table>
<thead>
<tr>
<th>Characteristics</th>
<th>n</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>&lt; 31.8</td>
<td>11</td>
<td>45.83</td>
</tr>
<tr>
<td>&gt; 31.8</td>
<td>13</td>
<td>54.16</td>
</tr>
<tr>
<td><strong>Gender</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>19</td>
<td>79.16</td>
</tr>
<tr>
<td>Female</td>
<td>5</td>
<td>20.83</td>
</tr>
<tr>
<td><strong>CLAS system</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>C: competition</td>
<td>9</td>
<td>37.50</td>
</tr>
<tr>
<td>L: leisure</td>
<td>8</td>
<td>33.33</td>
</tr>
<tr>
<td>A: active</td>
<td>2</td>
<td>8.33</td>
</tr>
<tr>
<td>S: sedentary</td>
<td>5</td>
<td>20.83</td>
</tr>
<tr>
<td><strong>Comorbidities</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non</td>
<td>19</td>
<td>79.16</td>
</tr>
<tr>
<td>Systemic</td>
<td>1</td>
<td>4.16</td>
</tr>
<tr>
<td>Organ-Specific (Musculoskeletal)</td>
<td>4</td>
<td>16.66</td>
</tr>
<tr>
<td><strong>Preoperative Splints</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>&lt; 5</td>
<td>14</td>
<td>58.33</td>
</tr>
<tr>
<td>5-10</td>
<td>8</td>
<td>33.33</td>
</tr>
<tr>
<td>&gt;10</td>
<td>2</td>
<td>8.33</td>
</tr>
</tbody>
</table>
Table 2. Difference in AOFAS and SFMCP score pre and post posterior ankle arthroscopy

<table>
<thead>
<tr>
<th></th>
<th>Base line</th>
<th>Final follow-up</th>
<th>t-value</th>
<th>p value</th>
</tr>
</thead>
<tbody>
<tr>
<td>AOFAS</td>
<td>76.83 ± 5.29</td>
<td>92.98 ± 3.96</td>
<td>5.65</td>
<td>&lt;0.00001</td>
</tr>
<tr>
<td>SFMCP</td>
<td>77.16 ± 3.53</td>
<td>98.54 ± 2.46</td>
<td>4.97</td>
<td>&lt;0.00001</td>
</tr>
</tbody>
</table>

Average Time Elapsed Between Posterior Arthroscopy And Ability to Return To Sports.
Conflicts

- Soft tissue: 19
- Osseous: 22
- Mixed: 17

Surgical findings

- Sinovitis: 13
- Fibrous Band: 20
- Os trigono: 8
- Osteophyte: 3
- Free Body: 2

n=24

- Posterolateral: 0
- Posteromedial: 8
- Posterior: 23

Os trigono

n=24

- I: 18
- II: 5
- III: 1
- IV: 0
Patients' Level Of Satisfaction Measured With A Likert Scale

Very Satisfied: 63%
Satisfied: 33%
Neither satisfied nor dissatisfied: 4%

Patients' Complications:
- Without complications: 92%
- Portal erithema: 4%
- Algodystrrophy: 4%
- Neither satisfied nor dissatisfied: 4%
- Satisfied: 33%
- Very Satisfied: 63%
Conclusions

• Few minimal complications
• Early rehabilitation
• Early return to every day and sports activities
• Good clinical and cosmetic results

Kitaoka, HB; Alexander, IJ; Adelaar, RS; Nunley, JA; Myerson, MS; Sanders, M: Clinical Rating Systems for the Ankle-Hindfoot, Midfoot, Hallux, and Lesser Toes. Foot Ankle, 1994; 15: 349-53.


