

## Functional Outcome Following Anterior Cruciate Ligament Reconstruction Revision Surgery Comparing Quadriceps Tendon, Reharvested Bone Patella Tendon Bone And Allograft Grats

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### INTRODUCTION:

This study aims to determine the clinical outcome for different choices of Anterior Cruciate Ligament Reconstruction (ACL) grafts used for revision of Anterior Cruciate Ligament Reconstruction (ACLR) at 3 years follow up.

### METHODS:

25 patients participated in the survey and answer the questionnaires. We used using Lysholm scoring, International Knee Documentation Committee (IKDC) score and Oxford Knee Score to measure the postoperative outcome.

### RESULTS:

There were 22 male and 3 females with the average age of 28.7 ±5.8. An autograft was used for revision in 15 patients (60 %) and allograft was used in 10 patients (40%). The average time from the revision of ACL reconstruction to the data collection was 3.3 ±1.3 years.

Table 1 Comparison of mean Lysholm score, IKDC and Oxford Knee score among three grafts (n=25)

Knee scoring system	Variable	N	Mean	P-value
Lysholm score	BPTB	8	73.73	0.70
	Quadriceps	7	73.29	
	Allograft	10	71.40	
IKDC	BPTB	8	66.75	0.16
	Quadriceps	7	69.29	
	Allograft	10	63.50	

Oxford knee score	BPTB	8	23.88	0.53
	Quadriceps	7	21.43	
	Allograft	10	22.00	

### DISCUSSIONS:

Our findings support our hypothesis that there is not significance different in clinical outcome for the different choices of grafts used for revision of ACL reconstruction after follow up for 2 years. These were also noted in Wright et al [2], Mayr et al [3] and Mohan et al [4].

### CONCLUSION:

Reharvesting patella tendon from same site after 3 years is equivalent to autogenous quadriceps graft and allogenuous tendons in ACL revision surgery in terms of functional outcome. It can be use as choice of graft in revision ACL surgery.

### REFERENCES:

- Cheung SC et al. (2012) Patients' attitudes and factors in their selection of grafts for anterior cruciate ligament reconstruction. *Knee* 19:49–54
- Wright et al.(2014). Effect of Graft Choice on the Outcome of Revision Anterior Cruciate Ligament Reconstruction in the Multicenter ACL 2301–231.