

medial patellofemoral ligament mpfl reconstruction

medial patellofemoral ligament mpfl reconstruction is a specialized surgical procedure designed to restore stability to the knee joint by repairing or reconstructing the medial patellofemoral ligament. This ligament plays a critical role in preventing the patella, or kneecap, from dislocating laterally. Injuries to the MPFL often result from traumatic events or recurrent patellar dislocations, leading to pain, instability, and impaired knee function. Medial patellofemoral ligament mpfl reconstruction aims to alleviate these symptoms by reestablishing the ligament's integrity and normal biomechanics of the knee. This article provides a comprehensive overview of the anatomy, indications, surgical techniques, rehabilitation protocols, and outcomes associated with MPFL reconstruction. Understanding these aspects is essential for clinicians, patients, and researchers interested in effective management of patellar instability.

- Anatomy and Function of the Medial Patellofemoral Ligament
- Indications for Medial Patellofemoral Ligament MPFL Reconstruction
- Surgical Techniques Used in MPFL Reconstruction
- Postoperative Rehabilitation and Recovery
- Outcomes and Complications of MPFL Reconstruction

Anatomy and Function of the Medial Patellofemoral Ligament

The medial patellofemoral ligament (MPFL) is a critical soft tissue structure located on the medial side of the knee. It connects the medial aspect of the patella to the femur, specifically attaching near the medial epicondyle. The MPFL is responsible for providing approximately 50-60% of the restraining force against lateral displacement of the patella, especially during the early degrees of knee flexion.

Understanding the anatomical features and biomechanical role of the MPFL is essential for appreciating why reconstruction is necessary when this ligament is damaged. The ligament's orientation and tensile strength contribute to patellar stability by counteracting lateral forces during knee movement, thereby maintaining proper alignment and tracking.

Structure and Biomechanics

The MPFL is a fan-shaped ligament composed primarily of collagen fibers arranged to resist lateral translation of the patella. Its dynamic interaction with the quadriceps and surrounding soft tissues helps stabilize the patellofemoral joint during activities such as walking, running, and jumping. Damage or rupture of the MPFL compromises this mechanism, often resulting in recurrent patellar

dislocations.

Relationship with Surrounding Structures

The MPFL works in concert with other stabilizers of the knee, including the medial retinaculum, vastus medialis obliquus (VMO) muscle, and the trochlear groove of the femur. These structures collectively maintain the patella within its groove, preventing abnormal lateral displacement. Injury to the MPFL disrupts this balance, necessitating surgical intervention in many cases.

Indications for Medial Patellofemoral Ligament MPFL Reconstruction

Not all cases of patellar instability require surgical reconstruction. Careful evaluation is necessary to determine when medial patellofemoral ligament mpfl reconstruction is indicated. Generally, surgery is considered when conservative treatments fail or in cases of recurrent patellar dislocation.

Recurrent Patellar Dislocations

Patients experiencing more than one episode of lateral patellar dislocation are primary candidates for MPFL reconstruction. Recurrent dislocations often lead to chronic instability, cartilage damage, and progressive knee dysfunction. Surgery aims to restore stability and prevent further episodes.

Failed Conservative Management

Initial management of patellar instability typically involves physical therapy, bracing, and activity modification. When these measures do not provide adequate symptom relief or stability, surgical reconstruction of the MPFL is considered a definitive treatment option.

Associated Knee Pathologies

Certain anatomical abnormalities, such as trochlear dysplasia, patella alta, or increased tibial tubercle-trochlear groove (TT-TG) distance, may influence the decision to perform MPFL reconstruction. In some cases, combined surgical procedures addressing these factors are performed alongside ligament reconstruction to optimize outcomes.

Surgical Techniques Used in MPFL Reconstruction

Medial patellofemoral ligament mpfl reconstruction involves replacing the damaged ligament with a graft, which can be autograft, allograft, or synthetic. The choice of technique depends on surgeon preference, patient factors, and graft availability.

Graft Selection

Common graft options include the gracilis tendon, semitendinosus tendon, or a portion of the quadriceps tendon. Autografts are often preferred due to lower risk of rejection and disease transmission, while allografts provide the benefit of reduced donor site morbidity.

Surgical Procedure Overview

The procedure typically involves the following steps:

1. Arthroscopic or open inspection of the knee to assess cartilage and soft tissue status.
2. Harvesting the graft from the donor site, if autograft is used.
3. Creating tunnels or fixation points on the patella and femur that replicate the native ligament's anatomical attachments.
4. Securing the graft in place using interference screws, anchors, or sutures to restore medial patellar restraint.
5. Verifying appropriate graft tension and patellar tracking throughout knee range of motion.

Advancements and Variations

Recent advancements in surgical techniques emphasize anatomic reconstruction, minimizing graft overtensioning, and preserving surrounding structures. Some surgeons utilize fluoroscopic or navigation guidance to improve tunnel placement accuracy. Additionally, minimally invasive approaches aim to reduce surgical morbidity and facilitate faster recovery.

Postoperative Rehabilitation and Recovery

Successful outcomes following medial patellofemoral ligament mpfl reconstruction depend heavily on a structured rehabilitation program tailored to individual patient needs. Rehabilitation focuses on restoring knee function, strength, and flexibility while protecting the reconstructed ligament during healing.

Early Phase Rehabilitation

The initial postoperative period emphasizes pain control, swelling reduction, and protection of the graft. Patients are often encouraged to use crutches and a knee brace to limit weight-bearing and knee motion. Passive range of motion exercises typically begin within the first week to prevent stiffness.

Strengthening and Functional Training

As healing progresses, physical therapy incorporates quadriceps strengthening, particularly targeting the vastus medialis obliquus muscle, to support medial patellar stability. Proprioceptive and balance training are introduced to enhance neuromuscular control and prevent re-injury.

Return to Activity

Gradual return to sports and high-impact activities is usually permitted around 4 to 6 months post-surgery, depending on recovery milestones and surgeon recommendations. Continued maintenance exercises are important to sustain knee stability long term.

Outcomes and Complications of MPFL Reconstruction

Medial patellofemoral ligament mpfl reconstruction has demonstrated favorable outcomes in terms of improved patellar stability, pain reduction, and functional recovery. Most patients report significant improvement in quality of life and return to pre-injury activity levels.

Success Rates

Studies indicate that MPFL reconstruction yields success rates exceeding 85% for preventing recurrent dislocation. Patient satisfaction is generally high, especially when surgical indications are appropriately identified and rehabilitation protocols are followed.

Potential Complications

While MPFL reconstruction is considered safe, complications can occur. These include:

- Graft failure or elongation leading to persistent instability.
- Patellar fracture due to tunnel placement or fixation techniques.
- Stiffness or limited range of motion postoperatively.
- Infection or wound healing problems.
- Pain related to hardware or graft irritation.

Strategies to Minimize Risks

Proper surgical technique, patient selection, and adherence to rehabilitation protocols are critical to minimizing complications. Surgeons must carefully plan graft fixation and tensioning to avoid overconstraint or maltracking of the patella.

Frequently Asked Questions

What is the medial patellofemoral ligament (MPFL) reconstruction?

MPFL reconstruction is a surgical procedure to repair or rebuild the medial patellofemoral ligament, which helps stabilize the patella (kneecap) and prevent it from dislocating.

When is MPFL reconstruction recommended?

MPFL reconstruction is typically recommended for patients with recurrent patellar dislocations or instability that do not respond to conservative treatments such as physical therapy and bracing.

What are the common techniques used in MPFL reconstruction?

Common techniques for MPFL reconstruction include using autografts (such as hamstring tendon) or allografts to recreate the ligament, with fixation methods like anchors or interference screws to secure the graft.

What is the typical recovery time after MPFL reconstruction surgery?

Recovery time after MPFL reconstruction generally ranges from 3 to 6 months, including physical therapy focusing on restoring range of motion, strength, and gradual return to activities.

What are the potential risks and complications of MPFL reconstruction?

Potential risks include infection, stiffness, graft failure, persistent instability, patellar fracture, and complications related to anesthesia, though most patients achieve good outcomes with proper surgical technique and rehabilitation.

Additional Resources

1. *Medial Patellofemoral Ligament Reconstruction: Techniques and Outcomes*

This comprehensive book covers the anatomy, biomechanics, and surgical techniques involved in MPFL reconstruction. It details patient selection criteria and postoperative rehabilitation protocols. The text also reviews clinical outcomes and potential complications, making it a valuable resource for orthopedic surgeons and sports medicine specialists.

2. *Patellofemoral Instability and MPFL Surgery: A Clinical Guide*

Focused on patellofemoral instability, this guide provides an in-depth analysis of MPFL reconstruction as a key treatment method. It includes case studies, imaging techniques, and surgical tips to optimize patient outcomes. The book is tailored for clinicians aiming to improve their understanding of knee stabilization procedures.

3. Advanced Techniques in MPFL Reconstruction

This book explores the latest advancements and innovative surgical methods in MPFL reconstruction. It highlights minimally invasive approaches, graft options, and fixation methods. Surgeons will find detailed procedural illustrations and outcome data to enhance their surgical practice.

4. Rehabilitation After Medial Patellofemoral Ligament Reconstruction

This text emphasizes the rehabilitation phase following MPFL surgery, offering evidence-based protocols for recovery. It discusses phased rehabilitation strategies, return-to-sport criteria, and management of postoperative complications. Physical therapists and orthopedic teams will find practical guidance to support patient recovery.

5. The Biomechanics of the Patellofemoral Joint and MPFL

Providing a foundational understanding of knee joint mechanics, this book delves into the role of the MPFL in patellar stability. It integrates biomechanical research with clinical applications, helping surgeons appreciate the rationale behind reconstruction techniques. The book also discusses how biomechanical insights influence surgical decision-making.

6. Sports Injuries of the Knee: MPFL Reconstruction and Beyond

Addressing a broad spectrum of knee injuries, this resource focuses on MPFL reconstruction as a treatment for patellar dislocation in athletes. It covers diagnosis, surgical options, and rehabilitation tailored to sports professionals. The book also includes chapters on injury prevention and long-term management.

7. Patellar Instability: Diagnosis and Surgical Management

This text offers a thorough overview of patellar instability causes, diagnostic methods, and treatment options including MPFL reconstruction. It provides detailed surgical techniques and postoperative care recommendations. The book serves as a clinical reference for orthopedic residents and practicing surgeons.

8. Graft Selection and Fixation Techniques in MPFL Reconstruction

Focusing on the technical aspects of MPFL surgery, this book reviews various graft materials and fixation devices. It compares autografts, allografts, and synthetic options, along with their biomechanical properties. Surgeons will benefit from the comparative analysis and surgical tips provided.

9. Complications and Revision Strategies in MPFL Reconstruction

This specialized book addresses common and rare complications encountered after MPFL reconstruction. It offers strategies for prevention, early detection, and revision surgery techniques. The content aids surgeons in managing challenging cases and improving overall patient outcomes.

Medial Patellofemoral Ligament Mpfl Reconstruction

Find other PDF articles:

<http://www.devensbusiness.com/archive-library-109/Book?trackid=Vgu41-6445&title=big-leaps-pediatric-therapy.pdf>

medial patellofemoral ligament mpfl reconstruction: Influence of Medial Patellofemoral Ligament Reconstruction on Patellofemoral Contact in Patients with Low-flexion Patellar Instability: an MRI Study Markus Alexander Siegel, Elham Taghizadeh, Thomas Lange, Andreas Fuchs, Tayfun Yilmaz, Philipp Maier, Hans Meine, Hagen Schmal, Kaywan Izadpanah, 2023

Abstract: Background: Medial patellofemoral ligament (MPFL) reconstruction is a well-established procedure for the treatment of patients with patellofemoral instability (PFI) at low flexion angles (0°-30°). Little is known about the effect of MPFL surgery on patellofemoral cartilage contact area (CCA) during the first 30° of knee flexion. Purpose/Hypothesis: The purpose of this study was to investigate the effect of MPFL reconstruction on CCA using magnetic resonance imaging (MRI). We hypothesized that patients with PFI would have a lower CCA than patients with healthy knees and that CCA would increase after MPFL reconstruction over the course of low knee flexion. Study Design: Cohort study; Level of evidence, 2. Methods: In a prospective matched-paired cohort study, the CCA of 13 patients with low-flexion PFI was determined before and after MPFL reconstruction, and the data were compared with those of 13 healthy volunteers (controls). MRI was performed with the knee at 0°, 15°, and 30° of flexion in a custom-designed knee-positioning device. To suppress motion artifacts, motion correction was performed using a Moiré Phase Tracking system via a tracking marker attached to the patella. The CCA was calculated on the basis of semiautomatic cartilage and bone segmentation and registration. Results: The CCA (mean $\pm$ SD) at 0°, 15°, and 30° of flexion for the control participants was 1.38 ± 0.62 , 1.91 ± 0.98 , and 3.68 ± 0.92 cm², respectively. In patients with PFI, the CCA at 0°, 15°, and 30° of flexion was 0.77 ± 0.49 , 1.26 ± 0.60 , and 2.89 ± 0.89 cm² preoperatively and 1.65 ± 0.55 , 1.97 ± 0.68 , and 3.52 ± 0.57 cm² postoperatively. Patients with PFI exhibited a significantly reduced preoperative CCA at all 3 flexion angles when compared with controls ($P \leq .045$ for all). Postoperatively, there was a significant increase in CCA at 0° of flexion ($P = .001$), 15° of flexion ($P = .019$) and 30° of flexion ($P = .026$). There were no significant postoperative differences in CCA between patients with PFI and controls at any flexion angle. Conclusion: Patients with low-flexion patellar instability showed a significant reduction in patellofemoral CCA at 0°, 15°, and 30° of flexion. MPFL reconstruction increased the contact area significantly at all angles

medial patellofemoral ligament mpfl reconstruction: A Finite Element Study on the Medial Patellofemoral Ligament Reconstruction Bharath Koya, 2013 Patellar instability is a major problem among young individuals. Chronic patellar instability termed as patellar dislocation occurs mainly due to the reduction in the medial restraining forces for the patella, excessive Q-angle, patella alta and trochlear dysplasia. It causes a tear of the medial patellofemoral ligament (MPFL) in the majority of instances. The MPFL is the main passive stabilizer preventing patellar instability and accounts for 50-60% of the total restraining forces. Reconstruction of the torn MPFL is a surgical option performed in chronic cases to improve patellofemoral biomechanics and to provide better stability at the knee. Finite element analysis (FEA) makes it possible to simulate the surgical technique of reconstruction of the MPFL, observe the effects on the articular cartilage structures and determine the patellofemoral kinematics, which is not possible with in vivo imaging analysis. In the present study, subject specific computational (finite element) models were built in ABAQUS based on the 3D anatomical geometry of the patellofemoral joint from pre-op MRI scans. The femur and patella were modeled as rigid structures with quadrilateral elements. Patellofemoral articular cartilage was modeled as isotropic elastic structures with hexahedral elements. The quadriceps muscle group, patellar tendon and the MPFL graft were represented using linear tension-only springs. The quadriceps muscle force was calculated from the foot load that the patient was able to withstand at a particular flexion angle during the MRI scan. The MPFL reconstruction surgery was simulated by modeling the ligament with uniaxial connector elements and material properties representing the graft material. FE simulations with appropriate boundary and loading conditions showed that the lateral translation was restricted with a MPFL graft. Validation of these FE models was done by comparing the results with the kinematics obtained from an analysis based on MRI scans taken before and after the MPFL reconstruction surgery. FEA results matched the

trends observed in the results of the experimental study, but they failed to replicate them quantitatively. In addition, the ratio of tension in the patellar tendon and quadriceps muscles and the tension in the MPFL graft elements was obtained from the simulations. The technique used in the present study can be improved by dealing with the limitations of the modeling like meshing of the structures and material properties. The FE models can be used to study the inter-subject differences, graft attachment points and graft tensioning to help with the ligament reconstruction procedures.

medial patellofemoral ligament mpfl reconstruction: Patellar Instability Surgery in Clinical Practice Vicente Sanchis-Alfonso, 2012-11-19 Among all the extensor mechanism pathologies, lateral patellar instability is of great interest not only for the knee specialist, but also for the general orthopedic surgeon and trainee. The procedure that is most frequently performed to treat lateral patellar instability is the medial patellofemoral ligament (MPFL) reconstruction. The reason for this great interest in this procedure is obvious. Medial patellofemoral ligament reconstruction is the most frequently performed procedure in the extensor mechanism. It also is the most predictable and has the best clinical results of all the procedures in the extensor mechanism. In this handbook we analyse the different reconstruction techniques, step by step, for the MPFL reconstruction, as well as other techniques less frequently used in the patient with lateral patellofemoral instability. We also analyse the treatment of medial patellofemoral instability. It is a very practical book, aimed at the general orthopedic surgeon and also the ones specialized in the knee.

medial patellofemoral ligament mpfl reconstruction: *Operative Techniques: Knee Surgery E-Book* Mark D. Miller, Brian J. Cole, Andrew Cosgarea, Brett D. Owens, James A Browne, 2017-01-29 Ideal for orthopaedic residents, fellows, and practicing surgeons alike, *Operative Techniques: Knee Surgery* offers all the step-by-step guidance you need to perform the latest techniques in knee surgery. As part of the highly visual *Operative Techniques* series, it boasts brief bulleted descriptions and a clean layout for ease of use, while clinical pearls help you optimize outcomes and obtain the best results. - Highly visual atlas-style text features brief bulleted descriptions and a clean layout for ease of use. - Clinical pearls help you optimize outcomes and obtain the best results. - Outlines positioning, exposures, instrumentation, and implants to give you a step-by-step guide for every procedure. - Provides information on post-operative care and expected outcomes, including potential complications. - Brief notes and supporting evidence on controversies offers important details about patient-focused surgery. - Fully updated procedural videos and figures provide enhanced visual guidance. - Features combined coverage of sports knee surgery, arthroscopy, and total knee replacement. - Discusses trochyioplasty, a controversial new innovation, as well as NPSL technique. - Boasts updated coverage of key procedures and techniques in sports knee surgery. - Expert Consult eBook version included with purchase. This enhanced eBook experience allows you to search all of the text, figures, images, videos, and references from the book on a variety of devices.

medial patellofemoral ligament mpfl reconstruction: *Patellofemoral Instability Decision Making and Techniques, An Issue of Clinics in Sports Medicine, E-Book* David R. Diduch, 2021-11-19 In this issue of *Clinics in Sports Medicine*, Guest Editor David R. Diduch brings his considerable expertise to the topic of Patellofemoral Instability Decision Making and Techniques. Top experts in the field cover key topics such as Trochlear Dysplasia, MPFL Reconstruction, Patella Alta, and more. - Provides in-depth, clinical reviews on Patellofemoral Instability Decision Making and Techniques, providing actionable insights for clinical practice. - Presents the latest information on this timely, focused topic under the leadership of experienced editors in the field; Authors synthesize and distill the latest research and practice guidelines to create these timely topic-based reviews. - Contains 13 relevant, practice-oriented topics including Evaluating PF Patients - Physical Exam, Radiographic Imaging and Measurements; Coronal malalignment - When and How to Perform a Tibial Tubercle Osteotomy; Rotational Deformity - When and How to Address Femoral Anteversion; Genu Valgum Correction and Biplanar Osteotomies; and more.

medial patellofemoral ligament mpfl reconstruction: *Insall & Scott Surgery of the Knee*

E-Book W. Norman Scott, 2011-09-09 Online and in print, Insall & Scott Surgery of the Knee, edited by W. Norman Scott, MD, and 11 section editors who are experts in their fields, is your complete, multimedia guide to the most effective approaches for diagnosis and management of the full range of knee disorders affecting patients of all ages. From anatomical and biomechanical foundations, to revision total knee replacement, this authoritative reference provides the most up-to-date and complete guidance on cutting-edge surgical procedures, the largest collection of knee videos in one knee textbook. Expanded coverage and rigorous updates—including 40 online-only chapters—keep you current with the latest advances in cartilage repair and regeneration, allograft and autografts, computer robotics in total knee arthroplasty, and other timely topics. This edition is the first book ever endorsed by The Knee Society. Access the full text - including a wealth of detailed intraoperative photographs, a robust video library, additional online-only chapters, a glossary of TKR designs, quarterly updates, and more - at www.expertconsult.com. Get all you need to know about the clinical and basic science aspects of the full range of knee surgeries as well as the latest relevant information, including imaging and biomechanics; soft tissue cartilage; ligament/meniscal repair and reconstructions; partial and total joint replacement; fractures; tumors; and the arthritic knee. Master the nuances of each new technique through step-by-step instructions and beautiful, detailed line drawings, intraoperative photographs, and surgical videos. See exactly how it's done. Watch master surgeons perform Partial and Primary TKR, Revision TKR, Tumor Replacement, Fracture Treatment, and over 160 videos on the expertconsult.com. Find information quickly and easily thanks to a consistent, highly templated, and abundantly illustrated chapter format and streamlined text with many references and chapters appearing online only. Access the fully searchable contents of the book online at www.expertconsult.com, including 40 online-only chapters, a downloadable image library, expanded video collection, quarterly updates, and a glossary of TKR designs with images and text from various device manufacturers. Grasp and apply the latest knowledge with expanded coverage of cartilage repair and regeneration techniques, expanded ligament techniques in allograft and autografts, computer robotics in surgical prognostics, fitting and techniques in partial and total knee arthroplasty, and more. Consult with the best. Renowned knee surgeon and orthopaedic sports medicine authority Dr. W. Norman Scott leads an internationally diverse team of accomplished specialists—many new to this edition—who provide dependable guidance and share innovative approaches to reconstructive surgical techniques and complications management.

medial patellofemoral ligament mpfl reconstruction: Evidence-Based Management of Complex Knee Injuries E-Book Robert F. LaPrade, Jorge Chahla, 2020-10-04 The ultimate resource for sports medicine conditions involving the knee, Evidence-Based Management of Complex Knee Injuries is an up-to-date reference that provides practical tools to examine, understand, and comprehensively treat sports medicine conditions in this challenging area. Using a sound logic of anatomy, biomechanics, lab testing, human testing, and outcomes analysis, editors Robert F. LaPrade and Jorge Chahla offer a single, comprehensive resource for evidence-based guidance on knee pathology. This unique title compiles the knowledge and expertise of world-renowned surgeons and is ideal for sports medicine surgeons, primary care physicians, and anyone who manages and treats patients with sports-related knee injuries. - Uses a step-by-step, evidence-based approach to cover biomechanically validated surgical techniques and postoperative rehabilitation, enabling surgeons and physicians to more comprehensively treat sports medicine knee injuries. - Covers the basic anatomy and biomechanics of the knee alongside more advanced objective diagnostic approaches and easy-to-follow treatment algorithms. - Provides an easy-to-understand review of pathology with clear, concise text and high-quality illustrations. - Demonstrates the importance and function of the ligaments and meniscus with exquisite anatomical illustrations and numerous biomechanical videos.

medial patellofemoral ligament mpfl reconstruction: Understanding the Patellofemoral Joint: From Instability to Arthroplasty; An Issue of Clinics in Sports Medicine Alexander Meiningner, 2014-09-26 This issue of Clinics in Sports Medicine will focus on patellofemoral disorders and how they are among the most common clinical conditions managed in the orthopaedic and

sports medicine setting. The correct diagnosis at an early stage is essential if subsequent treatment is to be successful and secondary complications are to be avoided. Nonoperative intervention is usually the first form of treatment; however, there is no consensus on the most effective method of treatment.

medial patellofemoral ligament mpfl reconstruction: Atlas of the Patellofemoral Joint Vicente Sanchis-Alfonso, 2012-12-20 A picture is worth a thousand words, and the goal of this atlas is to better understand patellofemoral conditions through pictures. Hence the reason we have decided to publish this book, which is a collection of the finest images of patellofemoral joint surgery, supplied by world renowned specialists in Knee surgery. All the images, footnotes and summaries are compiled in order to convey a simple understanding of this complex problem. This is a very practical book, aimed at the general orthopedic surgeon and also those that specialize in surgery of the knee. The book is divided into four sections, the first section focuses on the etiopathogenic bases, the second section focuses on emerging technologies, the third section includes difficult clinical cases studied, and the fourth section provides a description of the most important surgical techniques for the knee extensor mechanism.

medial patellofemoral ligament mpfl reconstruction: Staying Out of Trouble in Pediatric Orthopaedics David Skaggs, John M Flynn, 2020-02-25 Filled with pearls and wisdom from experts in the field, *Staying Out of Trouble in Pediatric Orthopaedics*, 2nd Edition, is a concise, easy-to-read guide to managing difficult orthopaedic problems in children. This high-yield, highly illustrated reference provides practical advice on how to deal with commonly seen issues as well as those that are less common but that pose grave threats to the patient. Focusing on preventing problems and avoiding serious complications and prepared by editors, authors, and gurus with more than 1000 years of combined experience in pediatric orthopaedics, this title is an invaluable resource for pediatric orthopaedic surgery fellows and all orthopaedists who care for children.

medial patellofemoral ligament mpfl reconstruction: Patellar Instability Shital N. Parikh, 2019-03-07 Written by experts in the field, *Patellar Instability and Dislocation: Classification and Operative Techniques* is a comprehensive, authoritative review of the procedures used to address this challenging condition. Includes step-by-step procedures, both in print and on video, to guide you through today's most effective approaches to stabilization and reconstruction, trochleoplasty, limb realignment osteotomy, and much more.

medial patellofemoral ligament mpfl reconstruction: Patellofemoral Pain, Instability, and Arthritis David Dejour, Stefano Zaffagnini, Elizabeth A. Arendt, Petri Sillanpää, Florian Dirisamer, 2020-05-23 This excellently illustrated book adopts an evidence-based approach to evaluate the efficacy of different techniques for the imaging and treatment of patellofemoral pain, instability, and arthritis. The aim is to equip practitioners with an informative guide that will help them to manage disorders of the patellofemoral joint by casting light on the many issues on which a consensus has been lacking. The opening chapters supply essential background information and explain the role of various imaging modalities, including radiography, CT, MRI, and bone scan. The various conservative and surgical treatment approaches for each of the three presentations - pain, instability, and arthritis - are then described and assessed in depth, with precise guidance on indications and technique. Postoperative management and options in the event of failed surgery are also evaluated. Throughout, careful attention is paid to the literature in an attempt to establish the level of evidence for each imaging and treatment method. The new edition has been thoroughly updated, with inclusion of additional chapters, in order to present the latest knowledge on biomechanics, diagnosis, surgical techniques, and rehabilitation.

medial patellofemoral ligament mpfl reconstruction: Anterior Knee Pain and Patellar Instability Vicente Sanchis-Alfonso, 2023-03-18 This textbook provides an authoritative reference on one of the most problematic entities in the pathology of the knee. Throughout the text, esteemed international experts highlight their clinical insights for ensuring optimal non-surgical and surgical outcomes when treating anterior knee pain and patellar instability. The chapters are revised with the latest updates and new chapters are featured focusing upon robotic-assisted patellofemoral

replacement, predictive diagnostic models in anterior knee pain patients based on artificial intelligence, brain network functional connectivity in anterior knee pain patients, and many other hot topics in the field. Anterior Knee Pain and Patellar Instability, 3rd Edition is an essential, multi-disciplinary textbook for all levels of orthopedic surgeons, physiotherapists, radiologists, biologists, pathologists, and bioengineers, who wish to learn more about this complex pathology that affects both young and older patients.

medial patellofemoral ligament mpfl reconstruction: *Master Techniques in Orthopaedic Surgery: Sports Medicine* Freddie H. Fu, 2019-06-12 Part of the highly regarded Master Techniques in Orthopaedic Surgery series , Sports Medicine, Second Edition , is a concise, lavishly illustrated reference covering key sports medicine surgeries in step-by-step detail. Ideal for orthopaedic surgery sports medicine specialists, this Second Edition presents the preferred techniques of surgical masters, illustrated with full-color, sequential, surgeon's-eye view intraoperative photographs, as well as superb drawings by noted medical illustrators. Fourteen new chapters keep you fully up to date with recent changes in the field.

medial patellofemoral ligament mpfl reconstruction: Noyes' Knee Disorders: Surgery, Rehabilitation, Clinical Outcomes E-Book Frank R. Noyes, 2016-02-02 Frank R. Noyes, MD - internationally-renowned knee surgeon and orthopaedic sports medicine specialist - presents this unparalleled resource on the diagnosis, management, and outcomes analysis for the full range of complex knee disorders. - Relies on Dr. Noyes' meticulous clinical studies and outcomes data from peer-reviewed publications as a scientifically valid foundation for patient care. - Features detailed post-operative rehabilitation programs and protocols so that you can apply proven techniques and ease your patients' progression from one phase to the next. - Presents step-by-step descriptions on soft tissue knee repair and reconstruction for anterior cruciate ligament reconstruction, meniscus repair, soft tissue transplants, osseous malalignments, articular cartilage restoration, posterior cruciate ligament reconstruction, and more to provide you with guidance for the management of any patient. - Contains today's most comprehensive and advanced coverage of ACL,PCL, posterolateral, unicompartmental knee replacement, return to sports after injury, along with 1500 new study references supporting treatment recommendations. - Features all-new content on unicompartmental and patellofemoral knee replacement, updated operative procedures for posterior cruciate ligament and posterolateral ligament deficiency, updated postoperative rehabilitation protocols, and new information on cartilage restoration procedures and meniscus transplantation. - Includes some of the most comprehensive and advanced discussions on arthrofibrosis, complex regional pain syndrome, tibial and femoral osteotomies, and posterolateral reconstructions available in modern published literature. - Covers gender disparities in ligament injuries for more effective analysis and management. - Includes access to 46 outstanding videos encompassing nearly 11 hours of surgery, live patient rounds, and live presentations. - Expert Consult eBook version included with purchase. This enhanced eBook experience allows you to search all of the text, figures, images, and references from the book on a variety of devices.

medial patellofemoral ligament mpfl reconstruction: Arthroscopy Carlos Suarez-Ahedo, 2022-03-16 This book covers a physical examination, imaging, differential diagnoses, and treatment of articular pathologies. For each diagnosis, the book sets out the typical presentation, options for non-operative and operative management, and expected outcomes. Practical and user-friendly, Arthroscopy is a useful resource for medical students and practitioners seeking fast facts on diagnosis and management. Its format makes it a perfect quick reference and its content breadth covers commonly encountered orthopedic problems in practice.

medial patellofemoral ligament mpfl reconstruction: Operative Techniques: Sports Knee Surgery E-Book Mark D. Miller, Brian J. Cole, Andrew Cosgarea, Jon K. Sekiya, 2008-07-11 This multimedia resource offers you all the how-to step-by-step guidance you need to perform all of the latest and best techniques in sports knee surgery. The complete, lavishly illustrated volume is made even better with a state-of-the-art companion web site! With chapters on such hot topics as knee arthroscopy and meniscus, articular cartilage procedures, knee ligament procedures, and

patellofemoral procedures, you will appreciate the clear and concise, detailed, and visual approach of this atlas and video collection. Large full-color intraoperative photos, diagrammable illustrations, dedicated website, and companion DVD demonstrate the full range of procedures. This short, accessible multimedia resource shows you what you need to know and how to do it all. The result is a detailed, easy-to-use reference that no orthopedic surgeon should be without. This is a title in the Operative Techniques series. Please visit www.operativetechniques.com for more information. Includes full-text web access so you can search the text online and surgical video clips that let you see the experts perform the techniques and perfect your own. Discusses pearls and pitfalls with an emphasis on optimizing outcomes to improve the quality of your technique and learn the expert's approach to getting the best results. Outlines positioning, exposures, instrumentation, and implants to give you a step-by-step guide for every procedure. Provides post-operative care and expected outcomes including potential complications and brief notes on controversies and supporting evidence to give you important details about patient-focused surgery. Highlights key anatomies with color photos and illustrations as well as diagrams that present cases as they appear in real life to help you see every detail with clarity.

medial patellofemoral ligament mpfl reconstruction: Surgical Techniques of the Shoulder, Elbow and Knee in Sports Medicine E-Book Brian J. Cole, Jon K. Sekiya, 2008-02-05 This reference offers a step-by-step, "how-to approach on performing both open and arthroscopic surgeries for sports-related injuries of the knee, elbow, and shoulder. Leaders in sports medicine offer guidance on everything from patient positioning and the latest surgical techniques through pearls and pitfalls and post-operative care. A concise and consistent chapter format makes it easy to find the answers you need; and abundant illustrations help you to master even the most technically challenging procedures. Guides you through the latest open and arthroscopic techniques, including arthroscopic rotator cuff repair and hamstring and allograft ACL reconstruction, in one convenient resource. Features a consistent, step-by-step approach, with numerous tips, pearls, and pitfalls, to help you obtain optimal outcomes from each procedure. Includes abundant illustrations so you can see exactly how to perform every technique step by step.

medial patellofemoral ligament mpfl reconstruction: Sports Knee Surgery Mark D. Miller, 2008 Accompanying DVD-ROM contains ... experts perform[ing] key techniques via video clips.--P. [4] of cover.

medial patellofemoral ligament mpfl reconstruction: ESSKA Instructional Course Lecture Book Stefano Zaffagnini, Roland Becker, Gino M.M.J. Kerkhoffs, João Espregueira Mendes, C. Niek van Dijk, 2014-04-17 This book provides an update on a wide variety of hot topics in the field of knee surgery, sports trauma and arthroscopy, covering the latest developments in basic science and clinical and surgical methods. It comprises the Instructional Course Lectures delivered at the 16th ESSKA Congress, which was held in Amsterdam during May 2014 and brought together the world's leading orthopaedic and sports physicians. The contributions are all written by European and international experts in their field. Each lecture has a practical focus and provides an up-to-date synthesis of core knowledge on the subject in question with the aid of high-quality illustrations. Take home messages and key recommendations are highlighted. This book will be of value to practitioners and researchers alike.

Related to medial patellofemoral ligament mpfl reconstruction

MEDIAL Definition & Meaning - Merriam-Webster The meaning of MEDIAL is mean, average. How to use medial in a sentence

Anatomical Terms of Location - Anterior - TeachMeAnatomy Imagine a line in the sagittal plane, splitting the right and left halves evenly. This is the midline. Medial means towards the midline, lateral means away from the midline.

Medial: MedlinePlus Medical Encyclopedia Medial means toward the middle or center. It is the opposite of lateral. The term is used to describe general positions of body parts. For example, the chest is medial to the arm

MEDIAL Definition & Meaning | Medial definition: situated in or pertaining to the middle; median; intermediate.. See examples of MEDIAL used in a sentence

Understanding Medial vs. Lateral, Proximal vs. Distal, and Superior Medial refers to being toward the midline of the body or the median plane, which splits the body, head-to-toe, into two halves, the left and right. Lateral is the side of the body or

MEDIAL | definition in the Cambridge English Dictionary / 'mi:.di.əl / Add to word list toward the center of the body rather than the sides (Definition of medial from the Cambridge Advanced Learner's Dictionary & Thesaurus © Cambridge

Medial - Definition, Meaning & Synonyms | relating to or situated in or extending toward the middle

Medial - definition of medial by The Free Dictionary medial ('mi:diəl) adj 1. of or situated in the middle 2. ordinary or average in size

medial - Wiktionary, the free dictionary medial (comparative more medial, superlative most medial) (mathematics) Of or pertaining to a mean or average. Situated in or near the middle; not at either end. The medial

MEDIAL definition and meaning | Collins English Dictionary 6 meanings: 1. of or situated in the middle 2. ordinary or average in size 3. mathematics relating to an average 4. → another Click for more definitions

MEDIAL Definition & Meaning - Merriam-Webster The meaning of MEDIAL is mean, average. How to use medial in a sentence

Anatomical Terms of Location - Anterior - TeachMeAnatomy Imagine a line in the sagittal plane, splitting the right and left halves evenly. This is the midline. Medial means towards the midline, lateral means away from the midline.

Medial: MedlinePlus Medical Encyclopedia Medial means toward the middle or center. It is the opposite of lateral. The term is used to describe general positions of body parts. For example, the chest is medial to the arm

MEDIAL Definition & Meaning | Medial definition: situated in or pertaining to the middle; median; intermediate.. See examples of MEDIAL used in a sentence

Understanding Medial vs. Lateral, Proximal vs. Distal, and Superior Medial refers to being toward the midline of the body or the median plane, which splits the body, head-to-toe, into two halves, the left and right. Lateral is the side of the body or

MEDIAL | definition in the Cambridge English Dictionary / 'mi:.di.əl / Add to word list toward the center of the body rather than the sides (Definition of medial from the Cambridge Advanced Learner's Dictionary & Thesaurus © Cambridge

Medial - Definition, Meaning & Synonyms | relating to or situated in or extending toward the middle

Medial - definition of medial by The Free Dictionary medial ('mi:diəl) adj 1. of or situated in the middle 2. ordinary or average in size

medial - Wiktionary, the free dictionary medial (comparative more medial, superlative most medial) (mathematics) Of or pertaining to a mean or average. Situated in or near the middle; not at either end. The medial

MEDIAL definition and meaning | Collins English Dictionary 6 meanings: 1. of or situated in the middle 2. ordinary or average in size 3. mathematics relating to an average 4. → another Click for more definitions

Related to medial patellofemoral ligament mpfl reconstruction

Medial quadriceps tendon femoral reconstruction: An alternative for patellar instability (Healio4d) Medial patellofemoral ligament reconstruction has been the primary procedure for the treatment of patellar instability, with

Medial quadriceps tendon femoral reconstruction: An alternative for patellar instability

(Healio4d) Medial patellofemoral ligament reconstruction has been the primary procedure for the treatment of patellar instability, with

Femoral fixation of medial patellofemoral ligament reconstruction grafts varies, presents challenge (Healio11y) Please provide your email address to receive an email when new articles are posted on . I palpate the medial structures and mark them, including the adductor magnus tendon, adductor tubercle, medial

Femoral fixation of medial patellofemoral ligament reconstruction grafts varies, presents challenge (Healio11y) Please provide your email address to receive an email when new articles are posted on . I palpate the medial structures and mark them, including the adductor magnus tendon, adductor tubercle, medial

3 Functional and radiological outcomes following medial patellofemoral ligament (MPFL) reconstruction (BMJ8y) Our aim was to study the functional and radiological outcomes following MPFL reconstruction. 108 patients undergoing MPFL reconstruction between January 2009 and July 2014 were identified. Demographic

3 Functional and radiological outcomes following medial patellofemoral ligament (MPFL) reconstruction (BMJ8y) Our aim was to study the functional and radiological outcomes following MPFL reconstruction. 108 patients undergoing MPFL reconstruction between January 2009 and July 2014 were identified. Demographic

Ligament reconstruction effective in treating kneecap instability from trochlear dysplasia (EurekAlert!8y) While a first time kneecap dislocation can usually be treated non-surgically, recurring dislocations often necessitate surgical intervention. MPFL (medial patellofemoral ligament) reconstructions have

Ligament reconstruction effective in treating kneecap instability from trochlear dysplasia (EurekAlert!8y) While a first time kneecap dislocation can usually be treated non-surgically, recurring dislocations often necessitate surgical intervention. MPFL (medial patellofemoral ligament) reconstructions have

Research reveals a novel hamstring sparing technique of MPFL reconstruction (Medical Dialogues13d) A novel hamstring sparing technique of MPFL reconstructionA composite graft made of medial retinaculum and quadriceps tendon

Research reveals a novel hamstring sparing technique of MPFL reconstruction (Medical Dialogues13d) A novel hamstring sparing technique of MPFL reconstructionA composite graft made of medial retinaculum and quadriceps tendon

Despite surgeries, Manny Machado's knees nothing to worry about (New York Post6y) While teams weigh just how much money to offer Manny Machado — and for how many years to structure the contract — one part of his past shouldn't necessarily give them pause. Since having surgery on

Despite surgeries, Manny Machado's knees nothing to worry about (New York Post6y) While teams weigh just how much money to offer Manny Machado — and for how many years to structure the contract — one part of his past shouldn't necessarily give them pause. Since having surgery on

'I just wanted to help:' Colonel Crawford's Brynn Bruner recovers in time for run to state (Telegraph-Forum1y) NORTH ROBINSON — Brynn Bruner had Medial Patellofemoral Ligament (MPFL) reconstruction on June 15th, a surgery that typically requires six to seven months of recovery. For the sophomore cross country

'I just wanted to help:' Colonel Crawford's Brynn Bruner recovers in time for run to state (Telegraph-Forum1y) NORTH ROBINSON — Brynn Bruner had Medial Patellofemoral Ligament (MPFL) reconstruction on June 15th, a surgery that typically requires six to seven months of recovery. For the sophomore cross country