Partial lateral patellar facetectomy for treatment of arthritis due to lateral patellar compression syndrome.

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Abstract

PURPOSE: The purpose of this study was to investigate the intermediate-term results of a retrospective clinical trial designed to establish the value of lateral retinaculum release of the patella in conjunction with partial lateral patella facetectomy in patients with stage III or stage IV patellofemoral arthritis.

METHODS: Between October 1992 and January 2005, all patients undergoing arthroscopy, lateral patellar retinaculum release, and lateral patella facetectomy were evaluated. In total, 66 knees in 63 patients (89%) were available for evaluation at a mean of 60 months after the index surgery. Evaluations consisted of preoperative and postoperative questionnaires, physical examinations, and radiographs. The main outcome measure was the Kujala patellofemoral score.

RESULTS: For those patients not undergoing total knee arthroplasty before evaluation, the mean Kujala score was 45.6 preoperatively and 72.0 postoperatively (P < .001); subjectively, 56% of patients were very satisfied, 32% satisfied and would repeat the procedure, 5% were indifferent, and 7% were dissatisfied and would not repeat the procedure. Including all patients who underwent total knee arthroplasty before evaluation and those who would not repeat the procedure or were indifferent, our accumulative failure rate was 17%. Correlations of several measures with the Kujala score, as well as subgroup comparisons of several measures between patients who were satisfied and those who were not satisfied with their reconstructions, were performed. However, all of these failed to achieve statistical significance after adjustment for multiple comparisons and so are not reported in this report.

CONCLUSIONS: Lateral patella retinaculum release and partial lateral patella facetectomy for end-stage patellofemoral disease provides up to 5 years of symptomatic relief in over 80% of carefully selected patients who do not have significant arthritis (grade IV) in the medial or lateral knee compartments. Significant lateral facet patellofemoral arthritis (grade IV) even in association with medial facet and femoral sulcus involvement is not a contraindication to this surgical approach.

LEVEL OF EVIDENCE: Level IV, therapeutic case series.

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