ACL Surgery: How to get it Right the First Time and What to do if it fails

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Subjects: Principles of primary ACL reconstruction, reasons for the failed ACL surgery, complex problems in the surgical management of the failed ACL, and rehabilitation after the failed ACL.

DESCRIPTION: The book describes and discusses the care of ACL injury and an efficient ways for the surgical treatment of a torn ACL. Furthermore, the book discusses principles of evaluating and treating the failed ACL reconstruction.

PURPOSE: The editors are aiming to provide insight into not only how to perform an ACL surgery correctly the first time, but also how to evaluate and manage a failed ACL reconstruction.

FEATURES: The text is 390 pages, divided into 34 chapters in 8 sections. Section I is “History, anatomy, and biomechanics” including chapters about natural history of the ACL-deficient knee, anatomy important successful ACL reconstruction, functional importance of the ACL, basic science aspects of ACL. Section II is “Preoperative evaluation” including chapters about ACL history and physical examination, and radiographic findings with an ACL injury. Section 3 is “Principles of primary ACL reconstruction” including chapters about graft choices in ACL reconstruction, allograft processing and efficacy, arthroscopically assisted ACL reconstruction using bone-tendon-bone autograft, ACL reconstruction autogenous hamstring tendons, double-bundle ACL reconstruction, hybrid fixation and all-inside techniques in primary ACL reconstruction, two-incision endoscopic ACL reconstruction, surgical strategies for acute combined injury, acute medial collateral ligament injuries, and preoperative pain management in ACL reconstruction. Section IV is “The failed ACL surgery” including chapters about common reasons for failure, examination and radiographic findings of a patient with a failed ACL, arthrometric evaluation of the failed ACL, and patient selection, indications, and expectations for revision ACL surgery. Section V is “The unstable ACL after primary reconstruction” including chapters about graft selection in revision ACL reconstruction, management of failed ACL with less than optimal tunnel placement, surgical treatment of the failed ACL with optimal tunnel treatment, and results of the revision ACL reconstruction. Section VI is “Complex problems in the surgical management of the failed ACL” including chapters about management of patients with femoral and tibial tunnel bone loss, management of patients with combined ACL and posterolateral corner insufficiency, management of patients with combined ACL and medial collateral ligament insufficiency, role of osteotomy in the management of the varus-aligned knee with a failed ACL, the role of meniscal transplant in the management of combined meniscal and ACL insufficiency after reconstruction, management of chondral injuries in an ACL-deficient knee, graft retention versus revision in the management of the ACL-reconstructed patient with an intra-articular infection, and stiffness after ACL reconstruction. Section VII “Rehabilitation after the failed ACL” including chapters about recent advances in the rehabilitation of ACL injuries and return to play after ACL reconstruction. Section VIII is “Case studies”

AUDIENCE: Orthopaedic surgeons in sports medicine, sport medicine specialists, and attendants, fellows and residents in these fields will be the main audiences.

ASSESSMENT: Every chapter has been formatted to contain most important aspects of patient evaluation, imaging, and treatment, with the focus on the surgical procedure. The surgical techniques are all comprehensively illustrated with original artwork and clinical photos in order to clearly demonstrate important aspects of each procedure. Also the authors describe every step of the procedures in a logical and methodical manner; they also mentioned clinical and technical pearls to share with the reader their personal experience.

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