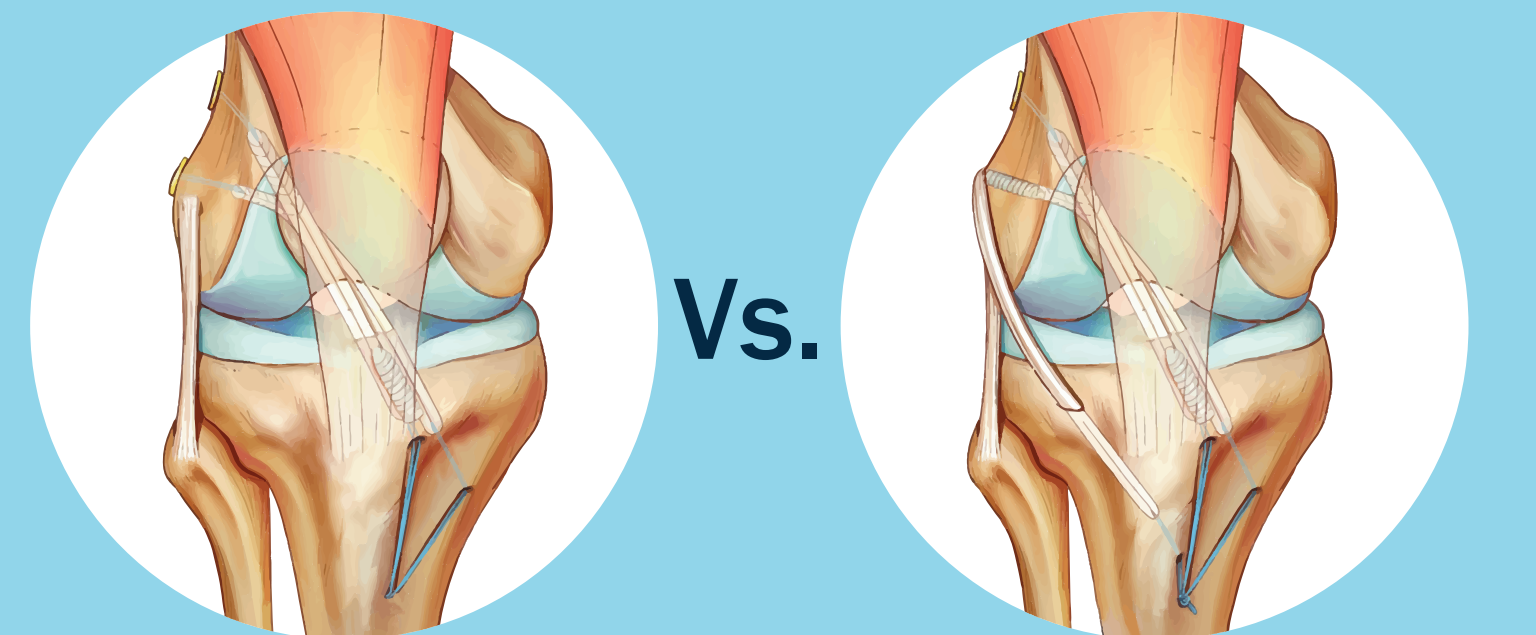
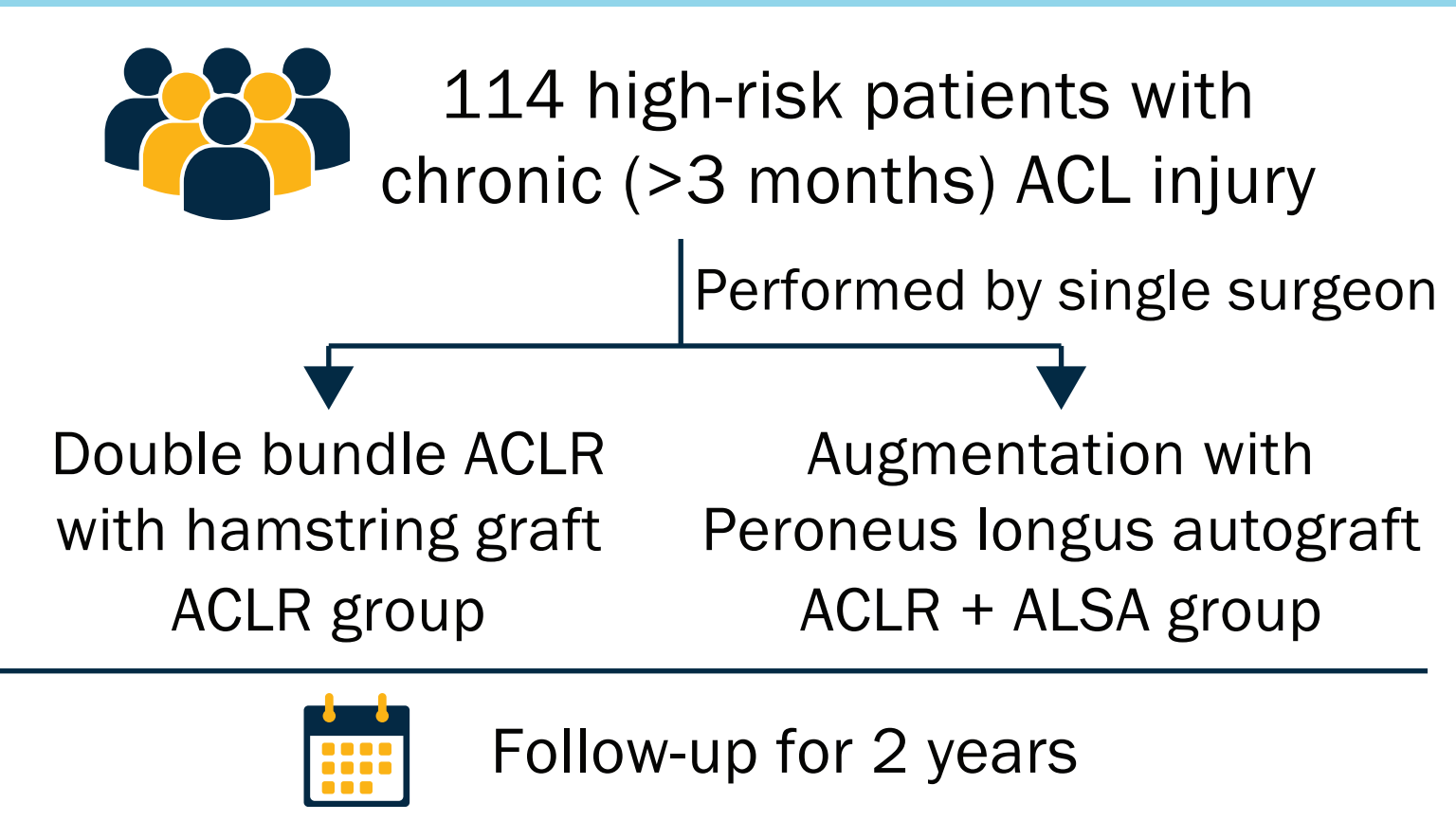


Role of Anterolateral Structure Augmentation in Anterior Cruciate Ligament Reconstruction Surgery











Anterior cruciate ligament reconstruction (ACLR) is the mainstream treatment for ACL tear, but some patients have a high risk of clinical failure



Does ACLR with anterolateral structure augmentation (ALSA) lead to better clinical outcomes?



Postoperative evaluation after 2 years

	ACLR group (n = 54)	ACLR + ALSA group (n = 60)
 Residual pivot shift (%)	 18.5	 3.3
 Clinical failure (%)	 20.4	 3.3
 Return to preinjury play (%)	 27.8	 48.3
 Return to competitive play (%)	 42.6	 63.3

 **For high-risk patients with chronic ACL injuries, combining ALSA and ACLR results in reduced rates of clinical failure and higher rates of return to play**

Reconstruction for Chronic ACL Tears with or without Anterolateral Structure Augmentation in Patients at High Risk for Clinical Failure
Chen et al. (2021) | DOI: 10.2106/JBJS.20.01680

www.jbjs.org |  theJBJS |  @JBJS

