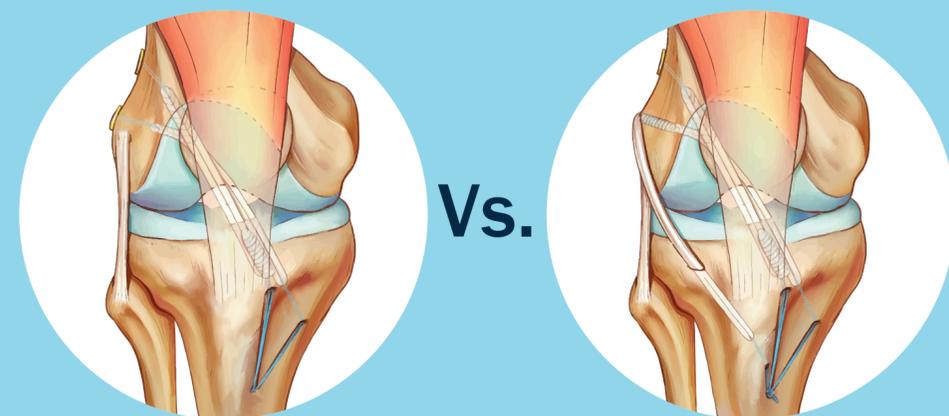


Role of Anterolateral Structure Augmentation in Anterior Cruciate Ligament Reconstruction Surgery

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?



114 high-risk patients with chronic (>3 months) ACL injury

Performed by single surgeon

Double bundle ACLR with hamstring graft
ACLR group

Augmentation with Peroneus longus autograft
ACLR + ALSA group



Follow-up for 2 years

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

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