OBJECTIVES
This study examines the functional outcomes after patella realignment utilizing an all-inside arthroscopic technique.

METHODS
- Retrospective study of patients from 2010 to 2014.
- All subjects had recurrent patellar instability associated with medial patellofemoral ligament (MPFL) injury and a minimum postoperative follow-up of one year.
- This all-inside arthroscopic technique includes lateral release and medial imbrication through sutures introduced percutaneously followed by intraarticular knot tying.
- The functional outcome of each patient was evaluated using the Pedi-IKDC questionnaire.

RESULTS
- 16 patients (14 females, 2 males) were identified with recurrent patellar dislocations who failed nonoperative therapy. The average ± SD patient age at time of surgery was 16.3 ± 2.9 years with a mean follow-up of 2.8 ± 1.5 years.
- The average Pedi-IKDC functional score was 80.9 ± 16.5 at final follow-up.
- Out of the 16 patients, eight patients had both pre and postoperative Pedi-IKDC functional scores with a preoperative score average of 66.9 ± 15.5 and a postoperative score average of 78.4 ± 20.2 ($p=0.35$).
- There was no statistically significant difference between patient reported pre-injury knee function as compared to current knee function at last follow-up ($p=0.49$).
- There were three patients who had repeat dislocations out of which only one patient required repeat surgical treatment (Roux Goldthwait procedure) 16 months after primary surgery, one patient had no recurrent dislocations after a trial of physical therapy, and the other patient is currently undergoing a trial of physical therapy. There was one patient who had recurrent subluxations.

DISCUSSION
- Lateral patellar subluxation and dislocation are common causes of knee pain and disability in the pediatric population.
- Although many open and arthroscopically assisted procedures have been previously described to treat recurrent patellar instability, there is no gold standard procedure.
- This all-inside arthroscopic technique provides a minimally invasive method for adequate patellar stability with good functional outcomes.

CONCLUSIONS
This combination of an all-inside arthroscopic lateral release and medial imbrication is considered a viable technique with a high rate of patient satisfaction and return to sports despite a relatively high rate of repeat patellar subluxation/dislocation.

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