POSTERIOR HAMSTRING HARVEST FOR ACL RECONSTRUCTION IN THE PEDIATRIC AND ADOLESCENT POPULATION

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PURPOSE

• Surgical reconstruction of the ACL in pediatric patients has several challenges, including harvesting of the hamstring tendons

• The traditional method for harvesting these tendons involves locating them at the pes anserine, which can be challenging and time consuming in pediatric patients

• This study aims to analyze the results of a posterior hamstring harvest method in pediatric patients.

METHODS

• This study was designed as a retrospective review of a series consecutive pediatric and adolescent patients who underwent ACL reconstruction by a single surgeon from January 2012 until June 2015 utilizing a posterior hamstring harvest technique.

• They are first harvested proximally with an open tendon stripper and distally with a closed stripper.

• Pre-operative, intra-operative, and post-operative findings and complications were analyzed.

RESULTS

• One hundred fifty-five patients underwent hamstring tendon harvest using the aforementioned technique.

• The mean age was 15 years, and the average follow-up was 10 months.

• There were no graft transections during harvesting of the tendons or vascular injuries.

• Two patients (1.3%) had superficial posterior wound healing issues that were treated with local wound care.

• No patients required a return to the operating room for wound healing / closure.

• No patients had range of motion deficits due to the posterior scar.

DISCUSSION

• The posterior hamstring harvest is a safe and reliable technique to harvest autograft tendon in pediatric ACL reconstructions.

• The posterior technique had no complications related to harvest and an extremely low rate of wound complications.

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