

PATTERNS OF ALTERATIONS IN TIBIOFEMORAL ROTATION AT 0, 15, AND 30 DEGREES OF KNEE FLEXION Washington University in St. Louis

IN PATIENTS WITH PATELLAR INSTABILITY

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RESULTS



INTRODUCTION

- Patellar instability results from a complex collection of static and dynamic factors.
- In addition to static bony deformities including tibial tubercle lateralization and trochlear dysplasia, alteration in tibiofemoral rotation (TFR) has been
- 30 degrees knee flexion

15 degrees

knee flexion

7 degrees

external

rotation

tibial

2 degrees tibial external rotation



RESULTS

• In both groups, the TT-TG distance decreased with knee flexion to 30° (13.4 mm), compared to 15 and 0 degrees of flexion (15.4 and 15.1 mm, respectively). <u>example</u> • Similarly, the TFR decreased with knee Left patellar flexion of 30° (2.7°), compared to 15 instability and 0° of flexion (5.4 and 4.6°, respectively). **Increased ER** • This represents relative internal present in 30 rotation of the tibia in 30° of flexion, degrees of flexion, that compared to relative external rotation of the tibia in 15 and 0° of flexion. • The pattern of TFR change between 0 and 30° of knee flexion was variable extension with 25% (n=4) having an increased and screw external rotation of the tibia greater mechanism than 5 degrees during terminal knee extension only, 31% (n=5) having persistent external rotation greater than 5° of the tibia throughout the 0 to 30° arc, and 44% (n=7) having less than five degrees of abnormality for each of these two components. • The pattern of TFR change did not correlate with the TT-TG distance at 0°.

demonstrated between patellar instability patients (increased external rotation of tibia) compared to controls. • However, it is unclear if this abnormal TFR is present throughout knee range of motion or represents an increased knee screw home mechanism.

OBJECTIVE

The purpose of the current study was to investigate the TFR profile of knees with patellar instability at 0, 15, and 30 degrees of flexion.





A total of 20 knees, including 16 with recurrent patellar instability and 4 without patellar instability, underwent MRI imaging with a patellar tracking protocol. Static sequences were taken with the knee extended (0°), as well as the knee flexed 15 and 30 degrees.

• The tibial tubercle-trochlear groove (TT-TG) distance and TFR was measured on

0 degrees knee flexion

7 degrees tibial external rotation



CONCLUSIONS

• Abnormal TFR plays a role in patellar instability and is partially responsible for abnormal TT-TG values.

• In the current study, we demonstrate that altered TFR with the knee extended can result from external tibial rotation

each knee at each flexion angle (0, 15,

• TFR values are presented with positive

values indicating external rotation of the

tibia relative to the femur.

30°).

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throughout knee range of motion (31%)

or an exaggerated screw-home

mechanism (25%), or a combination of

mild components of both (44%).