

Onderzoek naar de draaistabiliteit van de knie na reconstructie van de voorste kruisband.

No registrations found.

Ethical review	Positive opinion
Status	Recruiting
Health condition type	-
Study type	Observational non invasive

Summary

ID

NL-OMON27173

Source

Nationaal Trial Register

Health condition

Het doel van het onderzoek is om een beter beeld te krijgen van de stabiliteit van knieën met een intacte kruisband, een afgescheurde kruisband, een anatomisch en transtibiaal gereconstrueerde kruisband.

The aim of the research is to better understand the stability of knees with an intact ACL, an defect ligament, an anatomical and transtibial reconstructed ACL ligament.

Sponsors and support

Primary sponsor: dr EJP Jansen (MD, PhD)

Orbis Medisch Centrum

Dep. Orthopedie

dr Hvd Hoffplein 1

6162 BA Sittard-Geleen

(+31) (0)88 459 7823

Source(s) of monetary or material Support: None to be reported

Intervention

Outcome measures

Primary outcome

Our first outcome of interest will be the tibial rotation excursion. This is the graph which we can draw from our gait analysis system which measures the position of the tibia in relation to that of the femur and allows us to see the angle of rotation.

Secondary outcome

Additionally, we keep track of our patients' well-being and satisfaction using several questionnaires. We will use questionnaires and clinical tests that have been recommended by the Nederlandse Orthopaedische Vereniging (NOV):

1. Knee Injury and Osteoarthritis Outcome score (KOOS) (Questionnaire);
2. International Knee Documentation Committee (IKDC) (Questionnaire);
3. Tegner sports activity score (Questionnaire);
4. Lachman Test (Clinical Test);
5. Anterior Drawer Test (Clinical Test);
6. Pivot Shift Test (Clinical Test).

We will also take several other values into account that the VICON system generates automatically when we perform our 3D gait analysis:

1. Dynamic EMG Measurement;
2. Knee moments;
3. Foot approach angle.

Study description

Background summary

Experiments dealing with the rotational stability after an ACL reconstruction have not been

performed in vivo or were performed under static conditions. Although static rotational stability testing is currently the standard, many studies have shown that static stability tests are often incapable of correlating with functional outcome following anterior cruciate ligament-reconstruction-surgery. Through in vivo testing in dynamic weight bearing knees we expect to get a better view of the actual rotational pivoting forces in the knee.

Participants will be recruited by Dr P Deckers (MD) from the Dep. of Orthopedic surgery Atrium MC in Heerlen, Dr P Emans (MD, PhD) from the Dep. of Orthopedic surgery AZM in Maastricht and Dr EJP Jansen (MD, PhD) from the Dep. of Orthopedic surgery Orbis MC in Sittard-Geleen.

Study objective

Theoretically the anatomical reconstruction technique might give better results in rotational stability due to a more anatomical placement of the ACL-graft. Though it is difficult to test this correlating to functional outcome, because in current literature there seems to be no significant difference between both surgical techniques. Moreover, statically performed anterolateral rotational instability tests do not reproduce the forces loaded onto an in vivo anterior cruciate ligament. Through in vivo kinematic 3D- gait analysis, we aim to measure statistically and clinically significant differences in tibial rotational excursion when patients perform several motor tasks.

Study design

On the Gait-lab test day participants will be required to come to the Maastricht University Movement Laboratory. On this day they will follow the regimen described below.

Test day Schedule:

1. Physical examination (5-10 minutes);
2. EMG placement and maximum force determination (10-15 minutes);
3. Skin marker placement (5-10 minutes);
4. Skin marker calibration (5-10 minutes);
5. Vicon Gait analysis (10 minutes);
6. Questionnaires (10-20 minutes).

Total time 35-55 (47-75) minutes

Intervention

The transtibial ACL reconstruction. In this technique the orientation of the femoral tunnel depends on the orientation of the tibial tunnel, because the femoral tunnel is created through the tibial tunnel. In this way a non-anatomical reconstruction is performed.

The anatomical ACL reconstruction aims to better restore this rotational stability by placing an extra anteromedial arthroscopy portal through which the femoral tunnel can be reamed more laterally and more diagonally oriented, hereby placing the graft in a more anatomical orientation similar to the native ACL.

Contacts

Public

Department of Orthopedic Surgery, Orbis Medisch Centrum
dr H vd Hoffplein 1
M.G.M. Schotanus
Geleen 6162 BG
The Netherlands
+31 (0)88 4597823

Scientific

Department of Orthopedic Surgery, Orbis Medisch Centrum
dr H vd Hoffplein 1
M.G.M. Schotanus
Geleen 6162 BG
The Netherlands
+31 (0)88 4597823

Eligibility criteria

Inclusion criteria

Universal Inclusion criteria:

1. Age 18-40 years;
2. Able to understand and speak the Dutch or English language.

Healthy Control group:

1. No history of knee ligament or meniscal injury.

ACL Deficient Group:

1. Diagnosed ACL rupture with MRI or surgical knee arthroscopy;
2. Primary ACL rupture.

Transtibial Reconstruction group:

1. Received transtibial ACL reconstruction minimally one year ago.

Anatomical Reconstruction group:

1. Received anatomical ACL reconstruction minimally one year ago.

Exclusion criteria

Universal Exclusion criteria:

1. Not able and willing to sign informed consent;
2. BMI > 30.

ACL Deficient Group:

1. Ligament injury to the contralateral knee.

Transtibial Reconstruction group:

1. Ligament injury to the contralateral knee.

Anatomical Reconstruction group:

1. Ligament injury to the contralateral knee.

Study design

Design

Study type:	Observational non invasive
Intervention model:	Parallel
Allocation:	Non-randomized controlled trial
Masking:	Open (masking not used)
Control:	Active

Recruitment

NL	
Recruitment status:	Recruiting
Start date (anticipated):	02-04-2013
Enrollment:	80
Type:	Anticipated

IPD sharing statement

Plan to share IPD: Undecided

Ethics review

Positive opinion	
Date:	14-03-2013
Application type:	First submission

Study registrations

Followed up by the following (possibly more current) registration

ID: 39154

Bron: ToetsingOnline

Titel:

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register	ID
NTR-new	NL3729
NTR-old	NTR3892
CCMO	NL40420.068.12
ISRCTN	ISRCTN wordt niet meer aangevraagd.
OMON	NL-OMON39154

Study results

Summary results

N/A