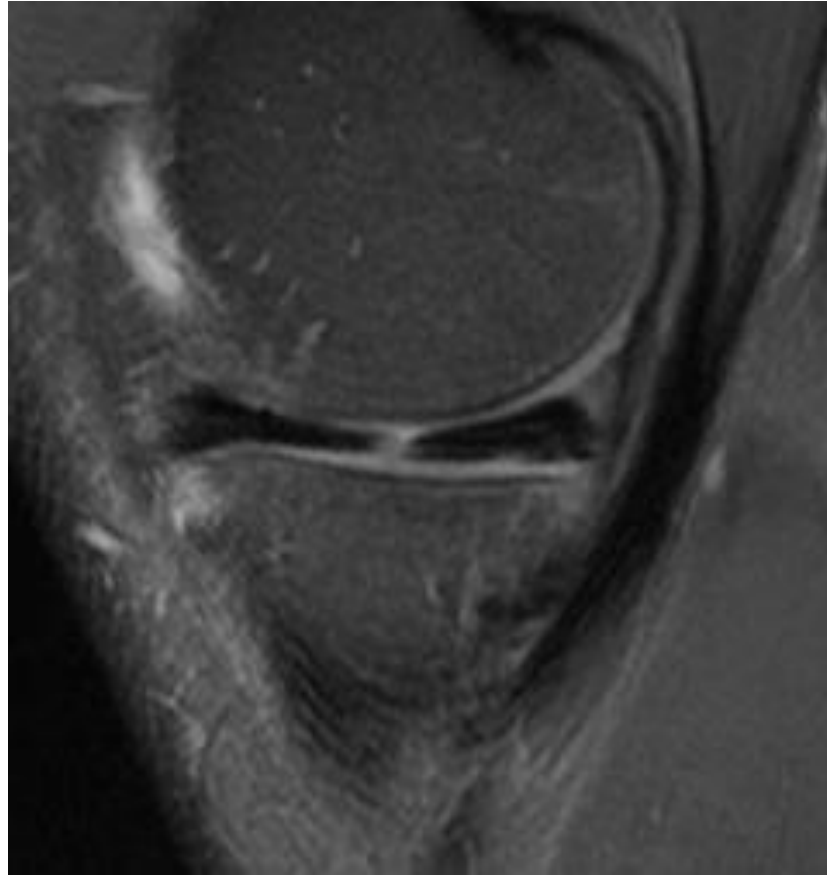


Complex Medial Meniscus Tear: *Repair technique*

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Patient

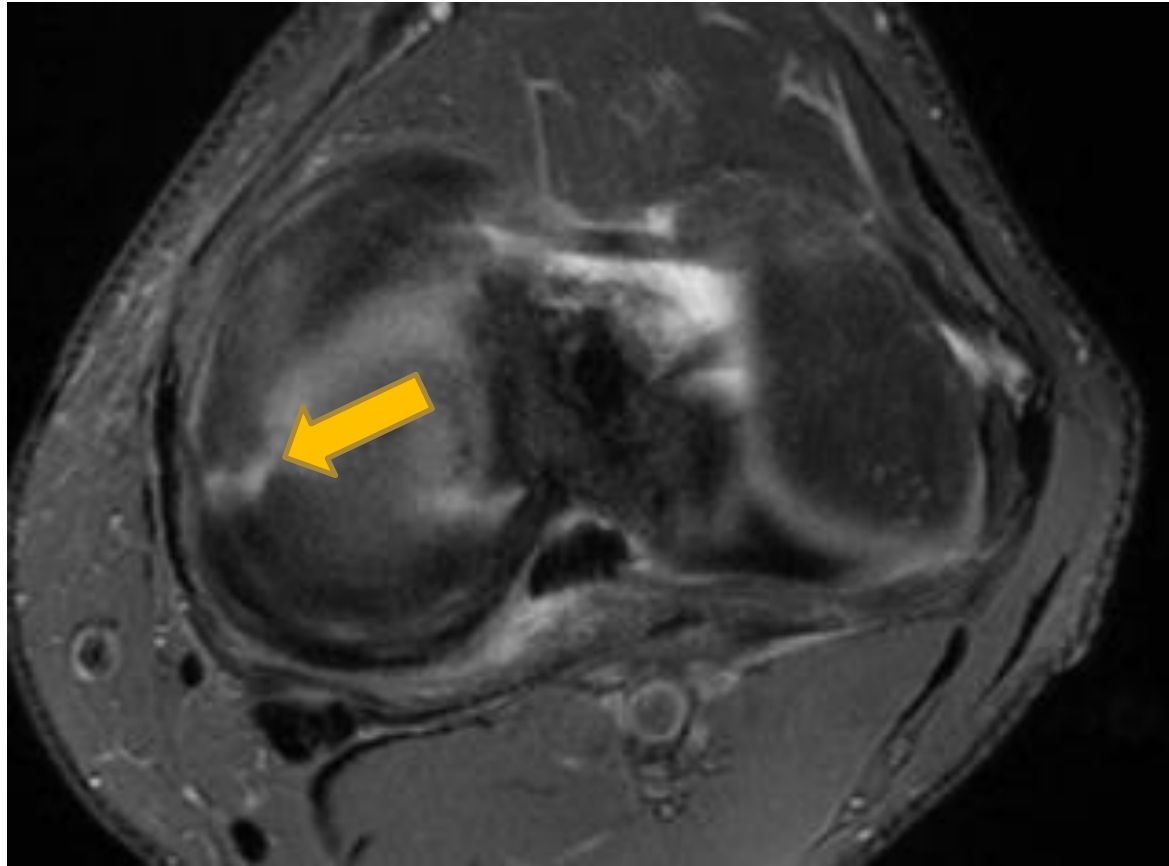
- 32-year-old male Ironman competitor
- Previous ACL reconstruction, stable knee
- Acute twisting injury resulting in an acute medial meniscus tear
- Not overweight, normal alignment, X-rays unremarkable



Sagittal MRI shows a radial split component in his medial meniscus tear.



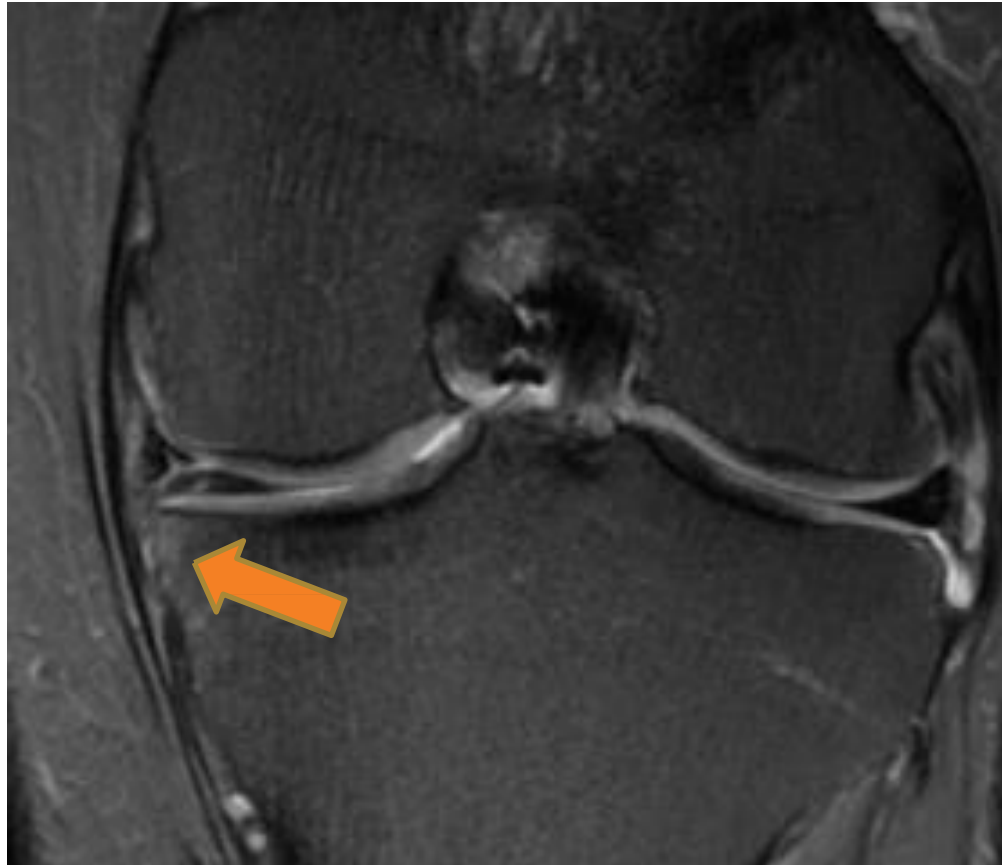
This highlights the radial split component.



On the axial view, the medial meniscus tear is again highlighted, showing the radial split component.



In the coronal view, there is evidence of the medial meniscus tear again.
This shows the complex nature of the tear with multiple tear planes.



This highlights evidence of early medial overload on the tibial plateau, consistent with the loss of meniscus load sharing due to the tear.

Patient: Post-Op

- Returned to biking and swimming, started running at 6 months
- Follow-up at 3 years (other knee injured) – has been doing Ironman's without problem, knee doing very well
- No pain, swelling, or any other symptoms

UCSF is driven by the idea that great breakthroughs are achieved when the best research, the best education and the best patient care converge.



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