

2024 AANA Annual Meeting

17. Lin. KY. Biomechanical Comparison of Suture Constructs for Transtibial Pull-Out Repair of Meniscal Root Tear. pdf

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Disclosure of Interest Information

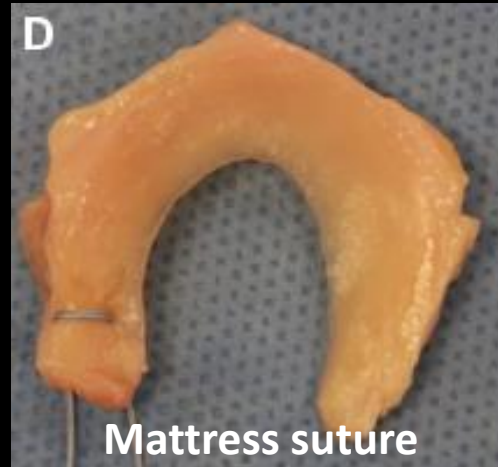
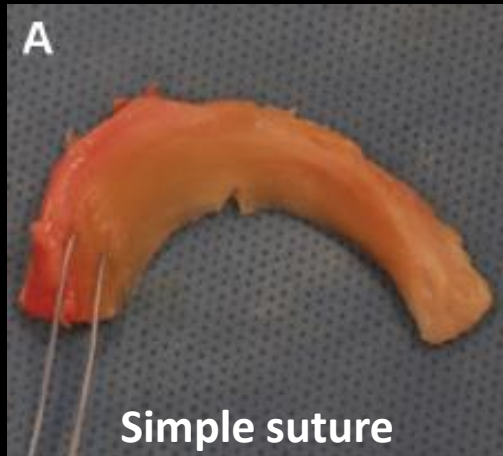
- None pertinent to this presentation

Introduction

Biomechanical Comparison of Arthroscopic Repair Constructs for Meniscal Root Tears

Adam W. Anz,^{*†‡} MD, Eric A. Branch,[§] MS, and Justin D. Saliman,^{||} MD
*Investigation performed at the Andrews Research and Education Institute,
Gulf Breeze, Florida, USA*

2014



- The Double-locking loop suture had significantly the highest ultimate failure loads compared with simple suture and mattress suture
- As the complexity of repair constructs increases, failure load and surgical time increase

*But... is the higher the failure load
the better ?*

Cyclic Displacement After Meniscal Root Repair Fixation

A Human Biomechanical Evaluation

2015

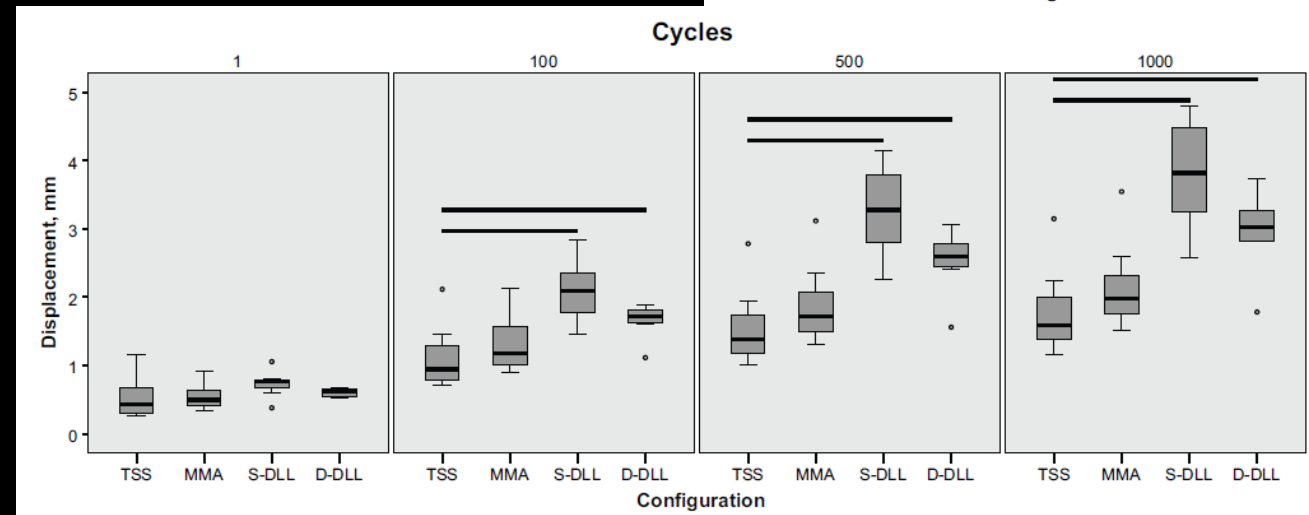
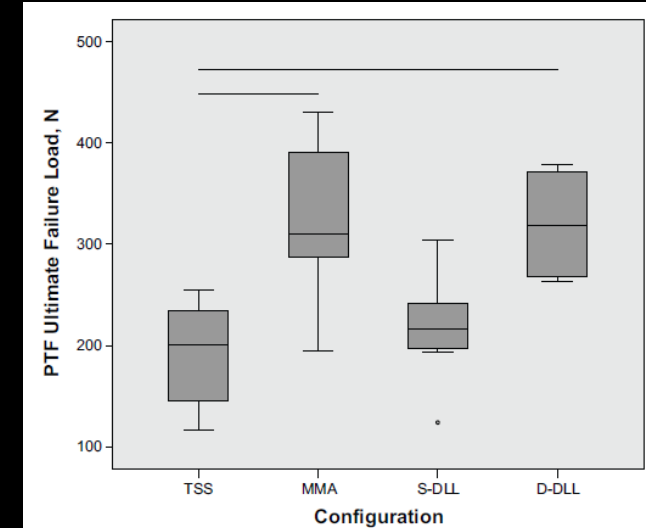
Robert F. LaPrade,^{*†‡} MD, PhD, Christopher M. LaPrade,[†] BA, Michael B. Ellman,^{†‡} MD, Travis Lee Turnbull,[†] PhD, Anthony J. Germinara,^{†‡} MD, and Coen A. Wijdicks,[†] PhD
Investigation performed at the Department of BioMedical Engineering, Steadman Philippon Research Institute, Vail, Colorado, USA

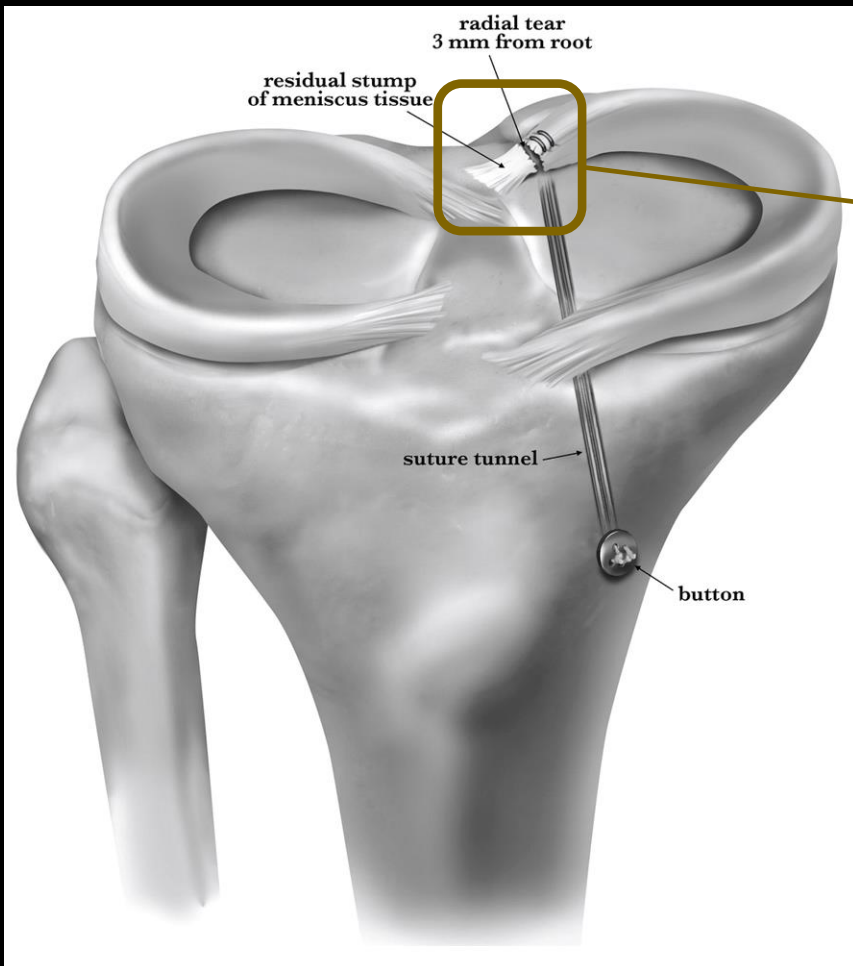


The Two Simple-suture fixation technique:

- Currently the standard
- The lowest technical difficulty
- The highest resistance to displacement at time zero
- Less meniscal invasion
- Time saving

2-SS vs. MMA vs. 1-DLL vs. 2-DLL





Meniscus-suture interface is the primary target of eliminating the displacement of transtibial pull-out repair

Biomechanical Evaluation of a Transtibial Pull-out Meniscal Root Repair

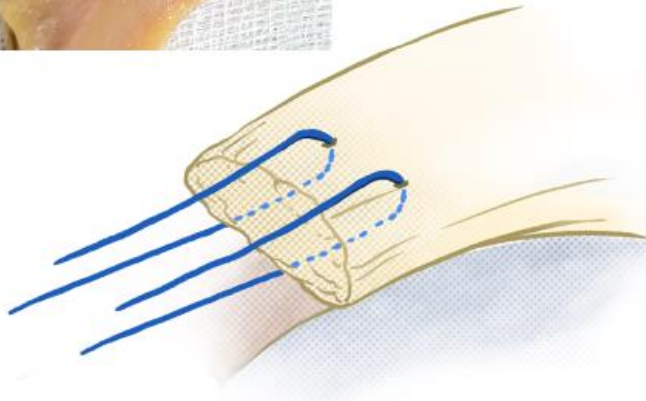
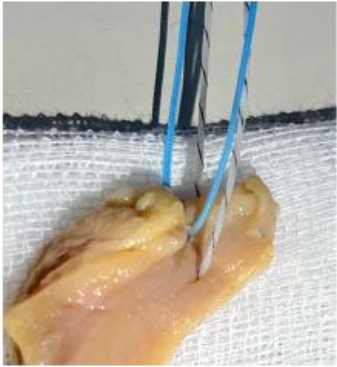
Challenging the Bungee Effect

2014

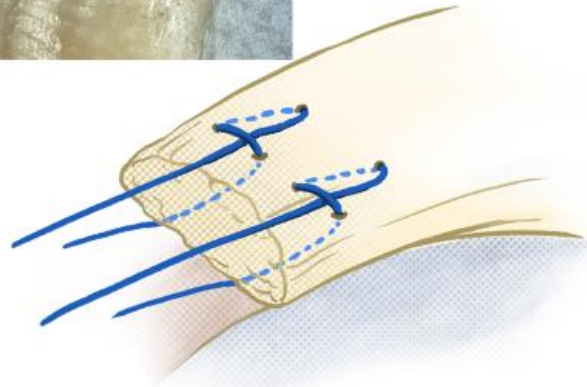
Anthony J. Cerminara,^{*†} MD, Christopher M. LaPrade,^{*} BA, Sean D. Smith,^{*} MSc, Michael B. Ellman,^{*†} MD, Coen A. Wijdicks,^{*} PhD, and Robert F. LaPrade,^{*†‡} MD, PhD
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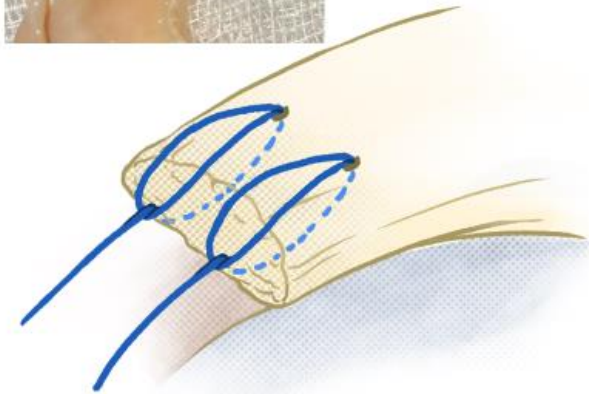
Suture Techniques



**Two Simple Suture
(TSS)**



**Two Modified Mason Allen
(TMMA)**

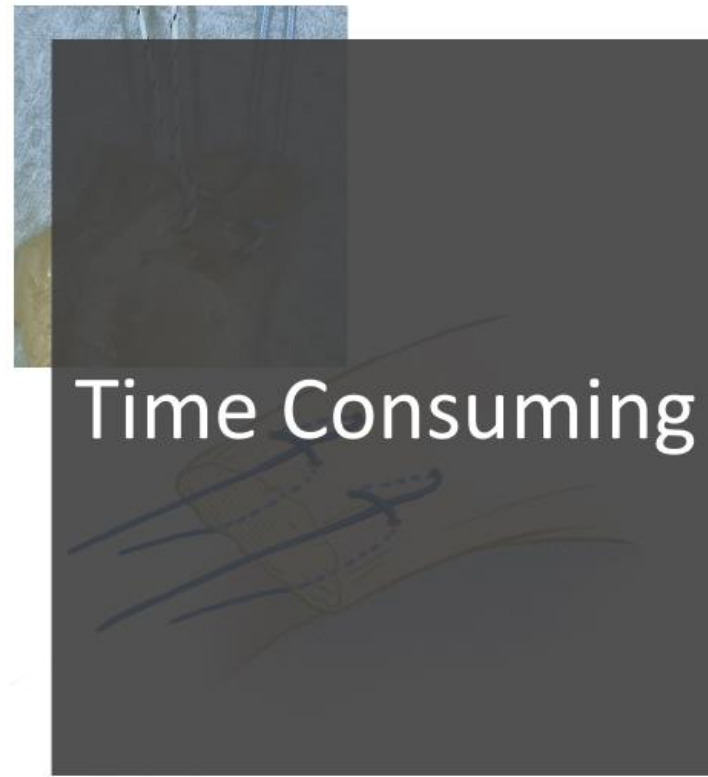


**Two Cinch Loop
(TCL)**

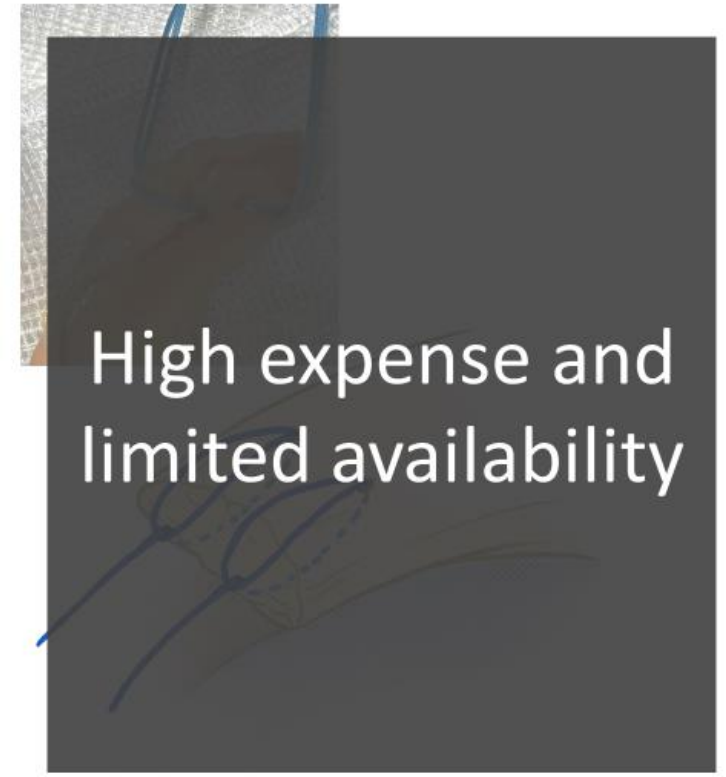
Suture Techniques



**Two Simple Suture
(TSS)**



**Two Modified Mason Allen
(TMMA)**



**Two Cinch Loop
(TCL)**

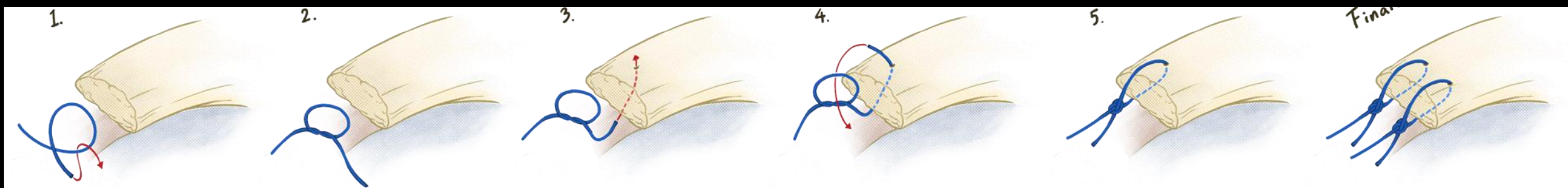
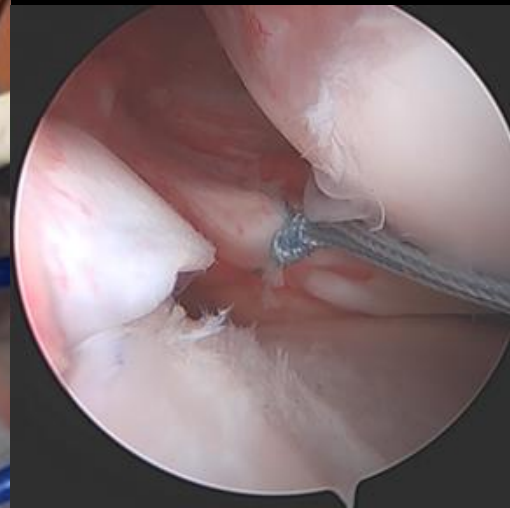
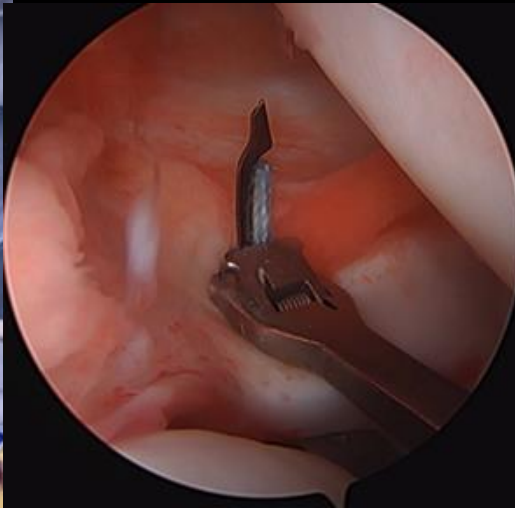
Arthroscopic Transtibial Pull-Out Repair for Meniscal Posterior Root Tear: The Slip Knot Technique

Hsin-Ya Chen, B.S., and Kuan-Yu Lin, M.D., Ph.D.



Arthroscopy
Techniques

2022



Arthroscopic Transtibial Pull-Out Repair for Meniscal Posterior Root Tear: The Slip Knot Technique

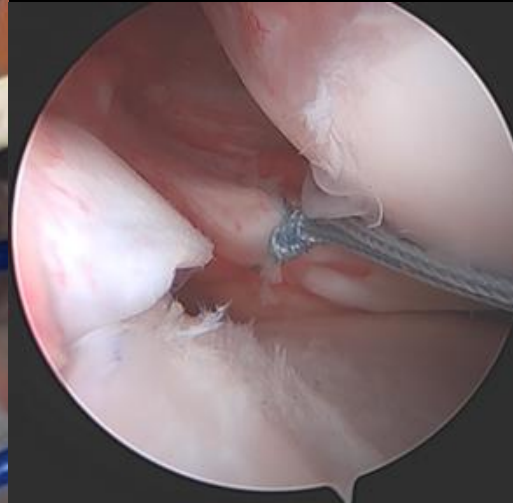
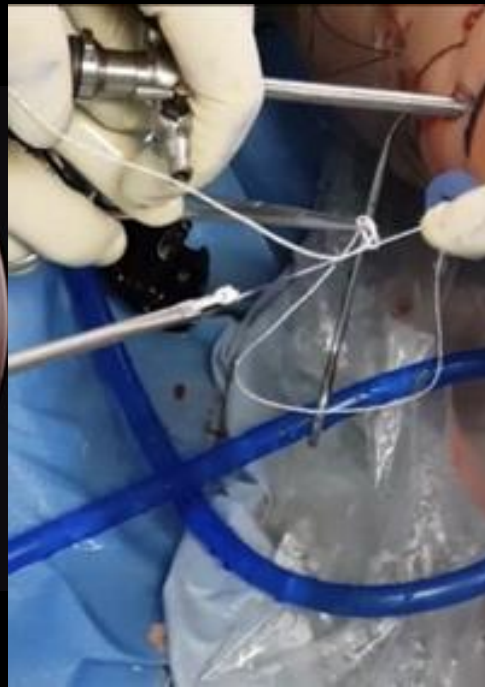
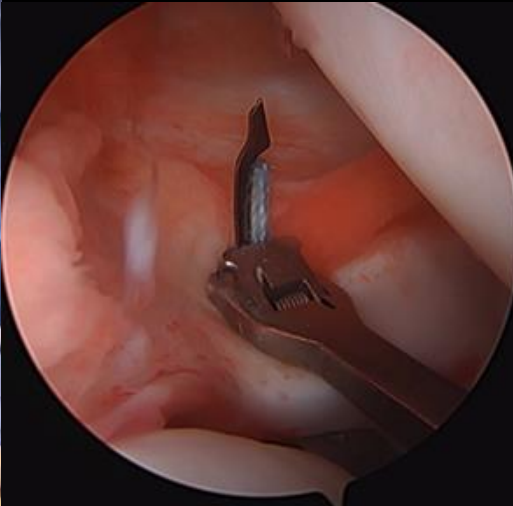
Hsin-Ya Chen, B.S., and Kuan-Yu Lin, M.D., Ph.D.



Arthroscopy
Techniques

2022

00:30 X



Simple, fast; yet biomechanically unproven

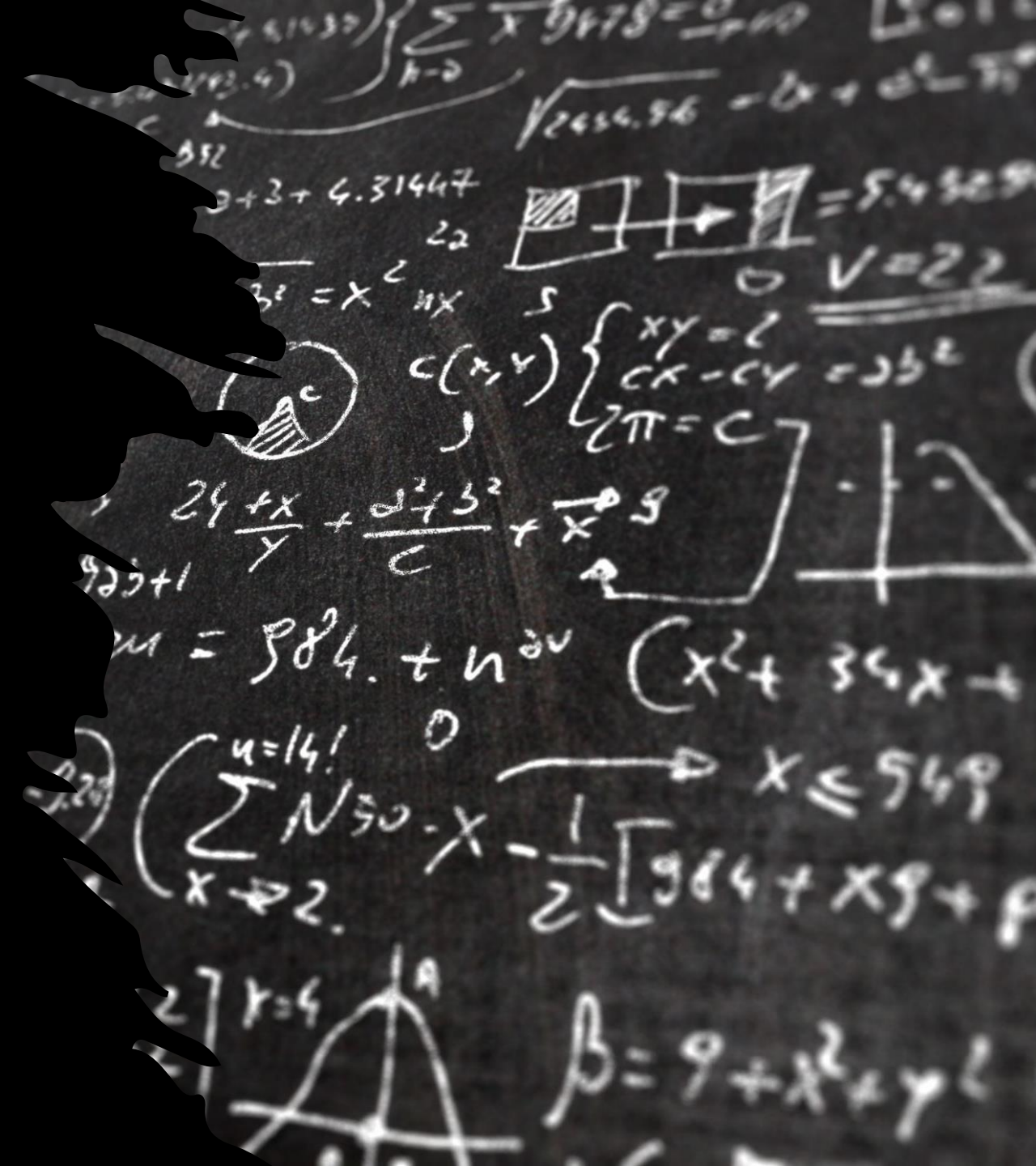
Objective

- Compare the biomechanical properties of 4 suture constructs:
Two simple-suture (TSS), two modified Mason-Allen (TMMA),
two cinch-loop (TCL), and two slip-knot (TSK)
 - Ultimate failure load
 - Yield load
 - Cyclic displacement (1, 100, 500, and 1000 cycles)
 - Displacement at ultimate failure load
 - Stiffness

Hypothesis

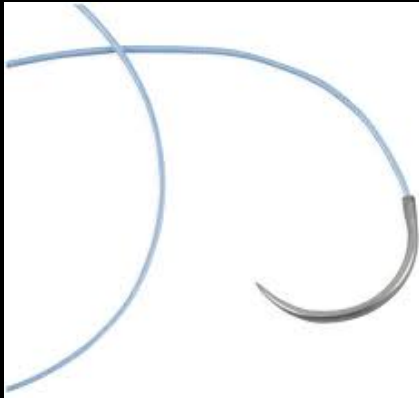
- The slip-knot technique is biomechanically stronger than the standard simple-suture technique, and gives less displacement than the modified Mason-Allen and cinch-loop techniques for the meniscal posterior root pullout repair

Methods and Materials



Suture materials

- # 2 fiberwires (Arthrex, USA)



Simple Suture

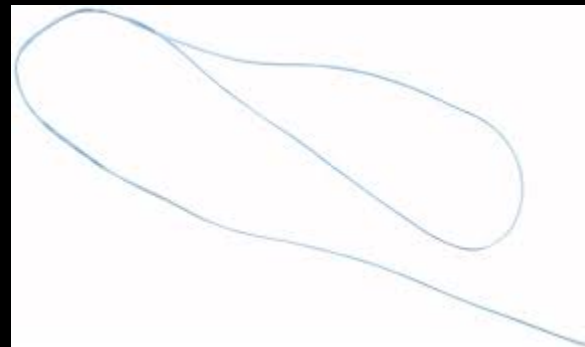


Modified Mason-Allen



Slip-Knot

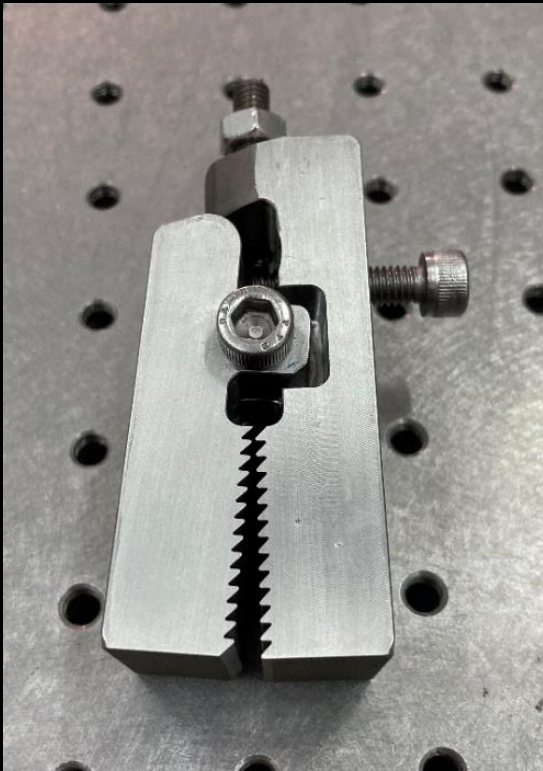
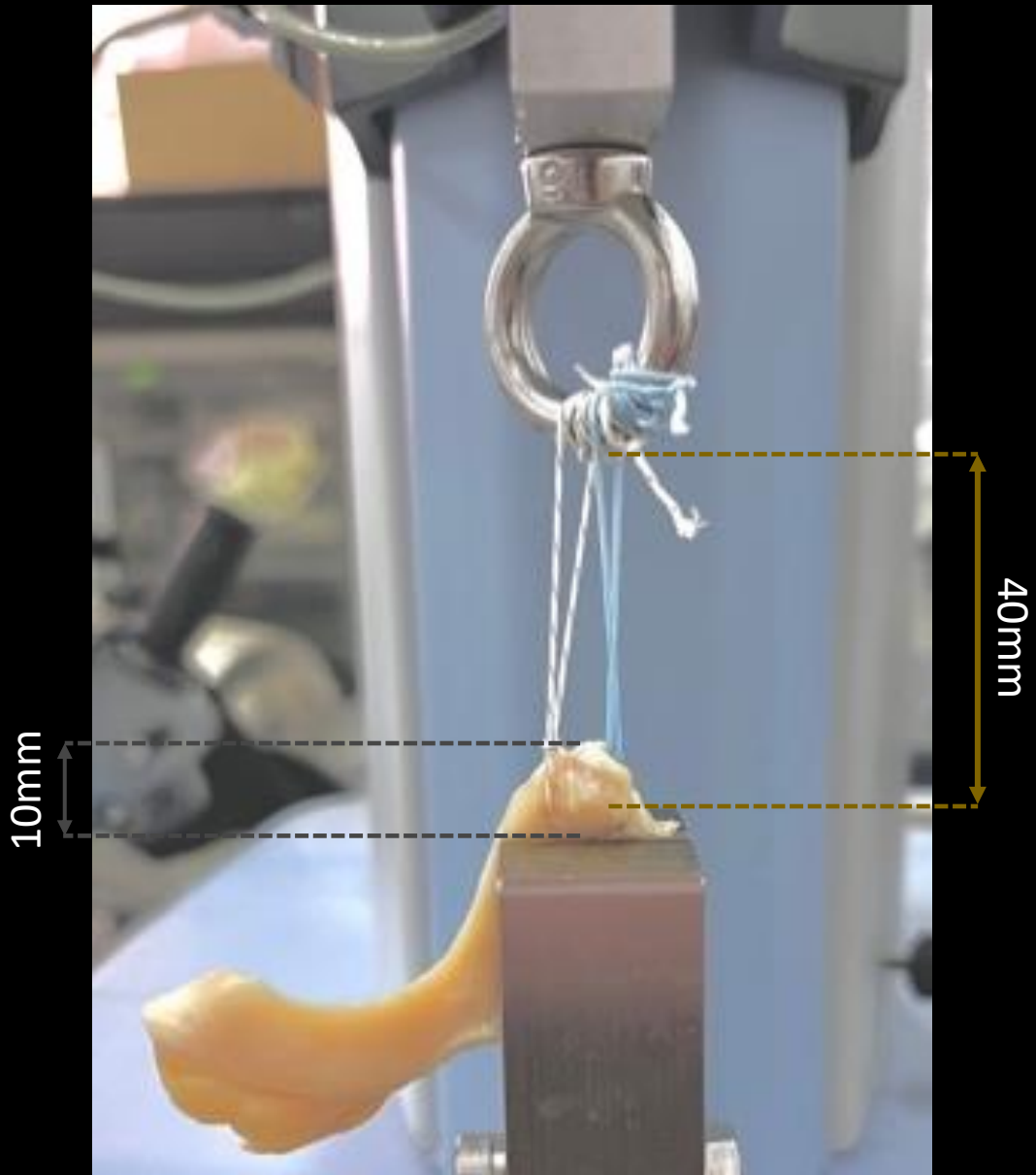
- # 2 Fiberlink (Arthrex, USA)
 - Cinch-loop suture



Specimen

- 16 human cadaveric knees (8M, 8F)
- mean age of 76 ± 7 years (range, 62 – 87 years)
- 32 menisci (16 M, 16 L)
- Randomly assigned to 4 groups (8 menisci / group)

Mounting of Human meniscus



Adjustable serrated clamp

Biomechanical Test

Cyclic Loading

Preload: 2 N for 10 seconds

Force: 5N-20N

Frequency: 0.5Hz

Cycle: 1000

Load to failure

Rate: 0.5 mm/second



EZ-SX; Shimadzu, Japan



Results



Displacement During Cyclic Loading

Displacement, mm

Group	After 1 Cycle	After 100 Cycles	After 500 Cycles	After 1000 Cycles
TSS	0.88±0.20	1.57±0.40	1.90±0.56	2.03±0.62
TSK	0.97±0.23(10.5)	1.79±0.44(14.4)	2.19±0.53(15.2)	2.33±0.57(15.1)
TMMA	1.01±0.14(15.2)	1.95±0.68(24.5)	2.58±0.82(35.5)	2.83±0.90(39.7)
TCL	2.45±0.51(180)^a	4.83±0.72(208)^b	6.26±1.13(229)^c	6.78±1.32(234)^d

Data are shown as mean ± standard deviation (95% confidence interval). TSS, Two Simple Stiches, MMA, modified Mason Allen, SK, Slip Knot, CL, Cinch Loop. Values in parentheses are the percentages of greater displacement compared with the two simple sutures (TSS) technique.

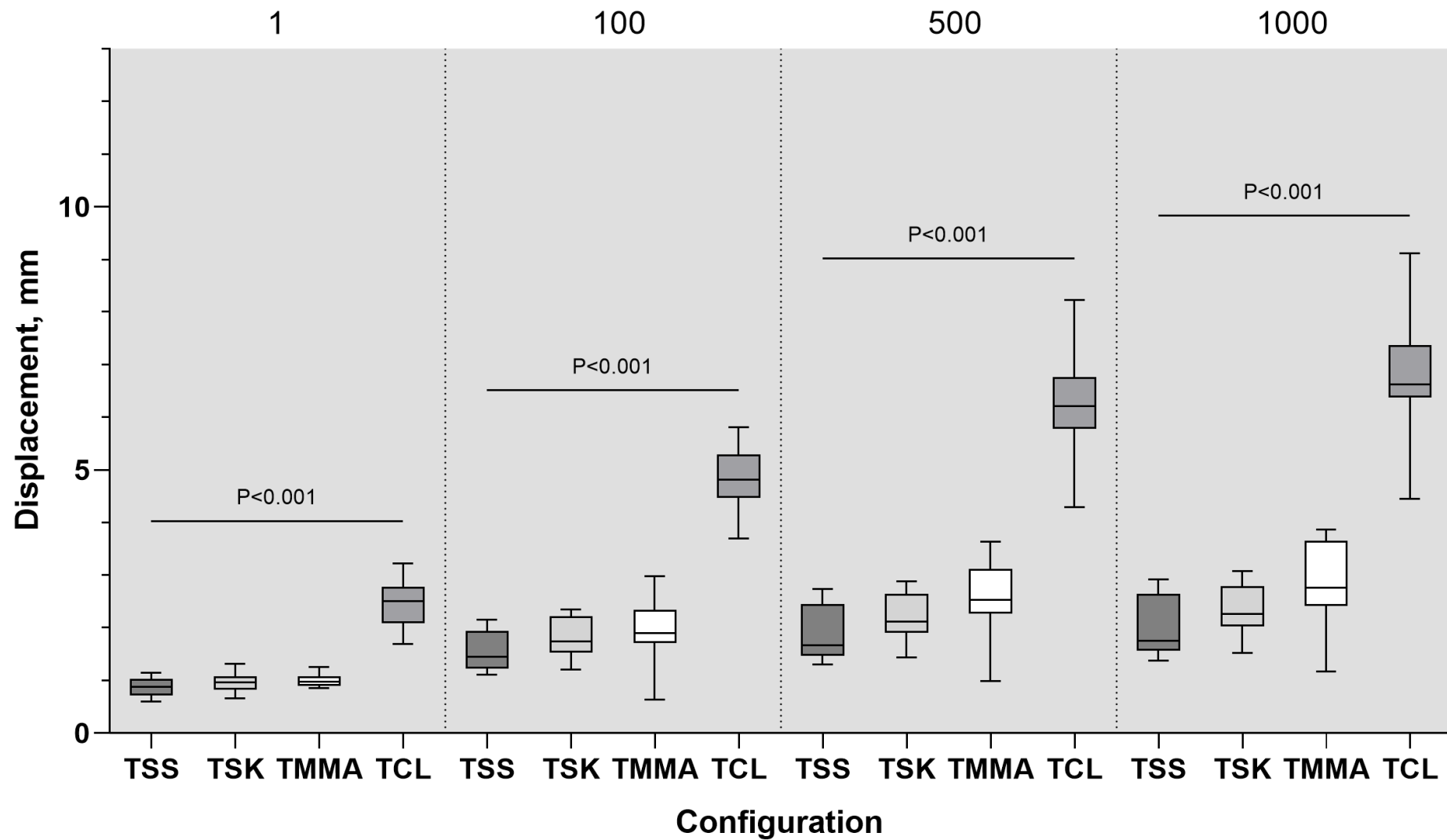
^a Significant difference compared with TSS after 1 cycle (p<0.001 in all comparison)

^b Significant difference compared with TSS after 100 cycle (p<0.001 in all comparison)



^c Significant difference compared with TSS after 500 cycle (p<0.001 in all comparison)

^d Significant difference compared with TSS after 500 cycle (p<0.001 in all comparison)

Cyclic Loading



Yield Load, Displacement at Yield Load, Ultimate Failure Load, Displacement at failure, and Stiffness

	TSS	TSK	TMMA	TCL
Yield load, N	73.64±22.12 ^{c,d}	102.90±28.42(39.7) ^d	133.90±21.08(81.8) ^a	164.04±65.05(122) ^{a,b}
Displacement at yield load, mm	2.30±0.94 ^d	3.30±0.92(43.7) ^d	4.74±0.83(106) ^d	8.57±4.26(273) ^{a,b,c}
Ultimate failure load, N	94.65±25.33 ^{c,d}	123.48±27.24(30.5)	168.38±23.24(77.9) ^a	170.54±57.32(80.2) ^a
Displacement at ultimate failure, mm	5.67±2.19 ^{c,d}	 5.53±1.25(-2.4) ^{c,d}	9.53±2.18(68.1) ^{a,b}	11.82±4.25(108) ^{a,b}
Stiffness, N/mm	23.84±10.65	 24.95±4.01(4.64)	23.15±2.98(-2.9)	19.61±13.33(-18)

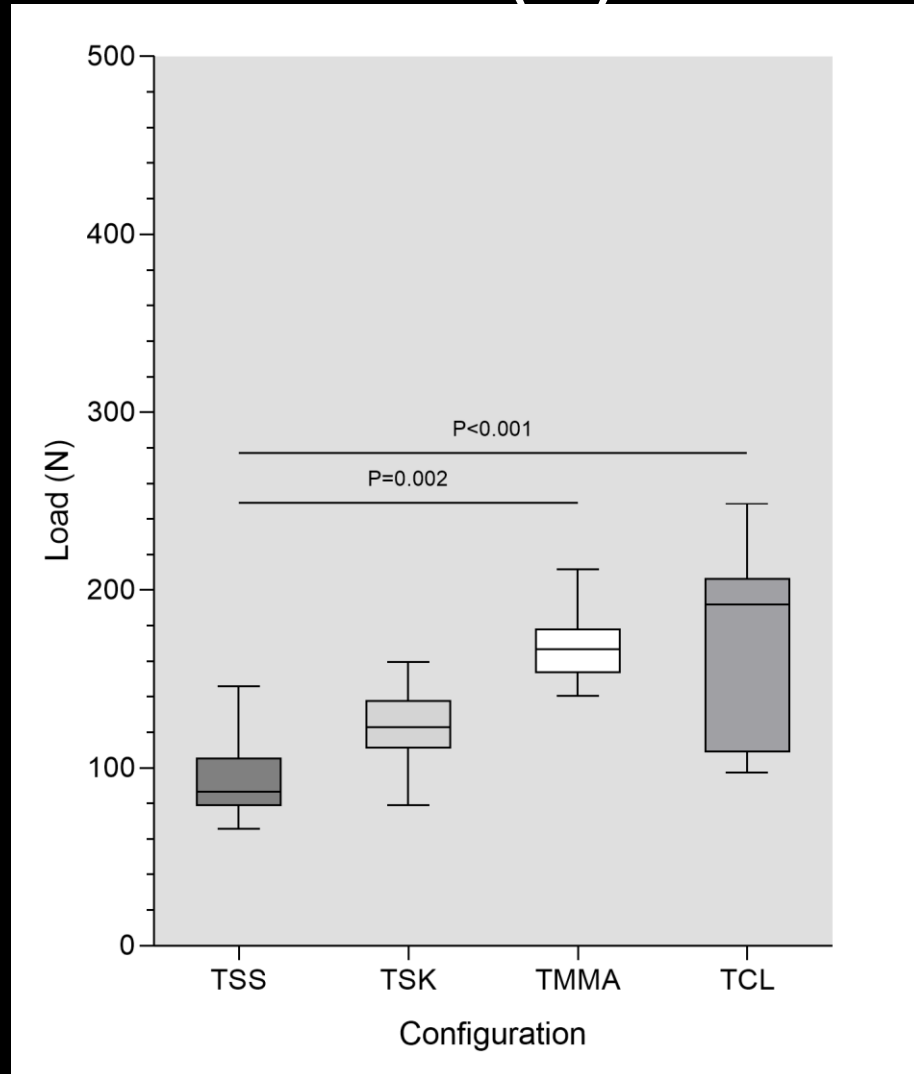
No significant difference: TSK vs. TMMA vs. TCL

Data are shown as mean ± standard deviation (95% confidence interval). TSS, Two Simple Stiches MMA, modified Mason Allen, SK, Slip Knot, CL, Cinch Loop. Values in parentheses are the percentages compared with the two simple sutures (TSS) technique.

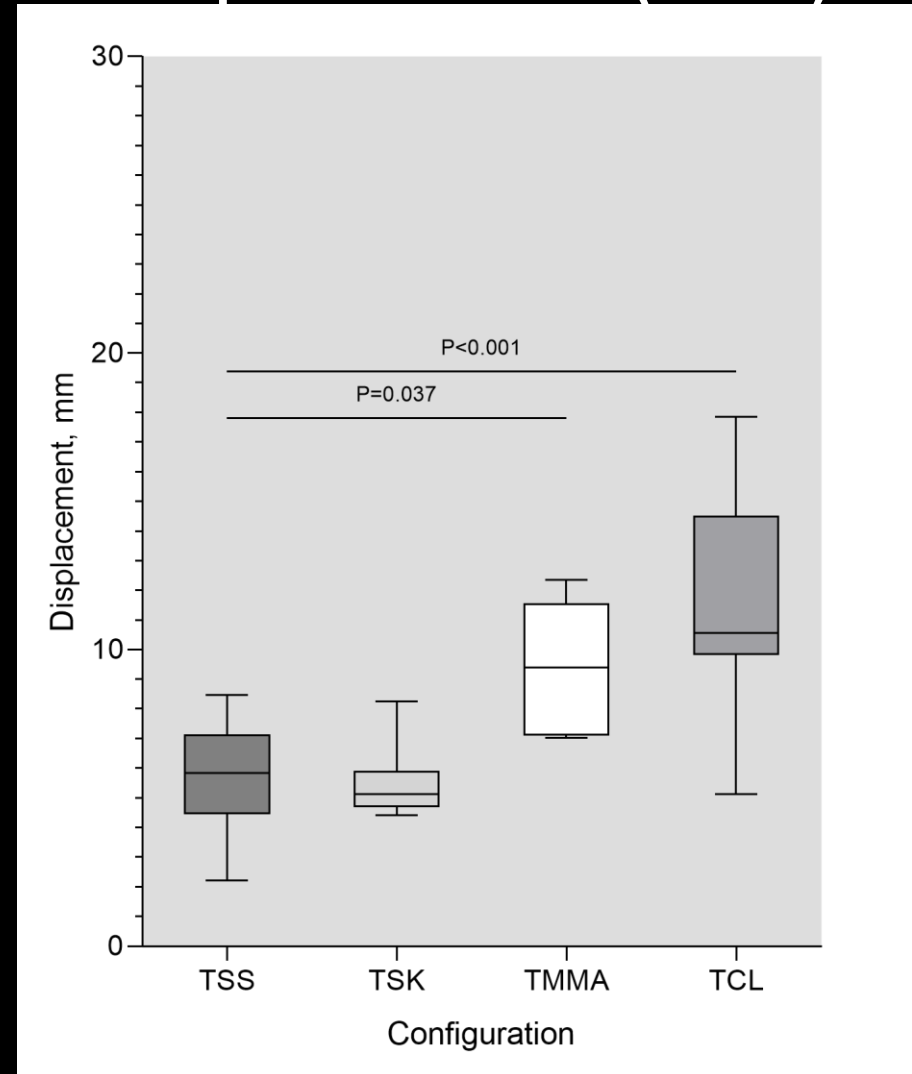
- ^a Significant difference compared with Two simple Stiches
- ^b Significant difference compared with Slip knot
- ^c Significant difference compared with Mason Allen
- ^d Significant difference compared with Cinch Loop

Ultimate Failure Load

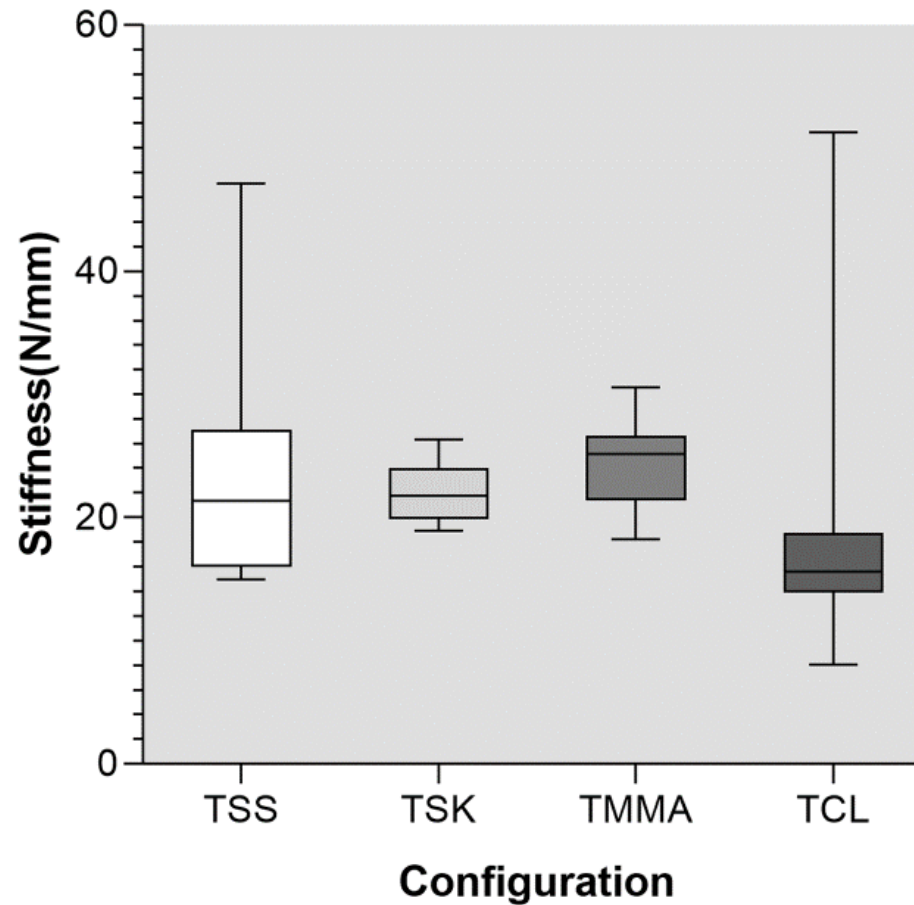
Load(N)



Displacement(mm)



Stiffness



No statistically significant difference in stiffness among the four constructs

Discussion



The 3 Pillars of an Excellent Suture Construct

**Low Displacement
during Various
Forces**

**High Load
Bearing
Capacity**

**Ease of
Implementation**



Low Displacement during various Forces

Meniscal function could be compromised if the suture elongation exceeded a threshold of 3mm*

Multiple piercing of the meniscus may render the meniscus vulnerable

Slip knot

15.1%

Mason Allen

39.7%

Cinch Loop

234%

More cyclic displacement comparing to clinical standard TSS

**Cinch Loop : Exceeded the 3mm threshold
(4.83mm) after just 100 cycles !!**

Stiffness

= The ability of a construct to resist deformation when a force is applied

	TSS	TSK	TMMA	TCL
Stiffness, N/mm	23.84±10.65	24.95±4.01(4.64)	23.15±2.98(-2.9)	19.61±13.33(-18)

VS.

+ 4.6%

- 2.9%

- 18%



High Load Bearing Capacity

Two Slip-Knot technique *vs.* TMMA *vs.* TCL

- No significant difference in ultimate failure
- Significantly least displacement at ultimate failure load ($P=0.03$, $P<0.001$, respectively)
- More complex suture construct would provide higher ultimate failure load, but would elongate more as it fails

Anz et al. AJSM 2014

Feucht et al. AJSM 2013

LaPrade et al. AJSM 2015

Vertullo et al. OJSM 2021

30N

threshold force for early post-operative rehabilitation

(Mitchell et al. Arthroscopy 2013)

Simple Suture

73.6N

<

Slip Knot

102.9N

Yield Load

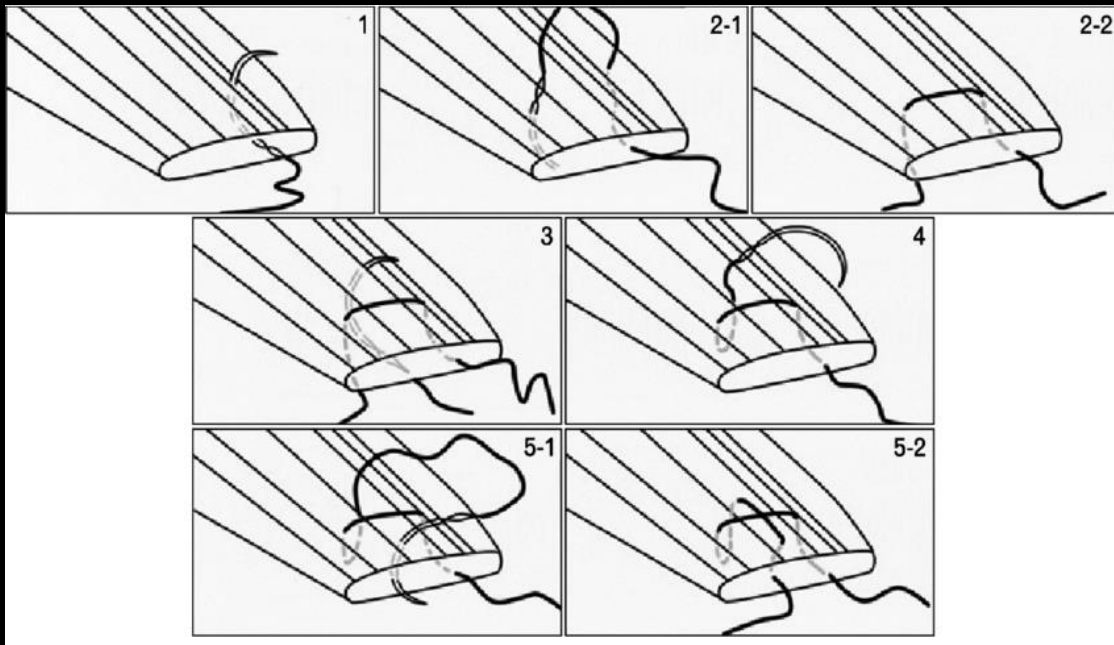
Ease of implementation with minimal meniscal injury

Modified Mason Allen **vs.** Simple-suture, Slip-Knot, Cinch-Loop

4 piercings



1 piercing



Fast, Easy
Less damage to meniscus



Conclusion

Signature _____

Date _____



The Slip-Knot Technique

Strength

Stronger than clinical standard two simple-suture technique

Displacement

Least displacement among the four suture constructs

Ease of Implantation

Simple, fast, with minimal meniscal damage



Thanks for Your Attention