

Chondral lesions can hinder recovery from partial meniscectomy

Leslie J. Bisson
Melissa A. Kluczynski
William M. Wind
Marc S. Fineberg
Geoffrey A. Bernas
Michael A. Rauh
John M. Marzo
Zehua Zhou
Jiwei Zhao

Video Abstract

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Abstract

Arthroscopic partial meniscectomy, or APM, is one of the most common surgeries for repairing knee damage – particularly for patients with meniscal tears. During the operation, surgeons often incidentally uncover additional damage to the surrounding cartilage in the form of chondral lesions. But despite the high prevalence of these lesions, their effects on postoperative outcomes aren't clear. To better understand this relationship, a US-based research team has compared how patients with and without chondral lesions fare after APM. They've found that those going into surgery showing this damage have less successful recoveries. This conclusion was based on a fresh look at the results of a clinical trial known as the ChAMP trial. The trial had originally compared two methods for dealing with chondral lesions during APM: simple observation or debridement. Although patients' clinical and functional scores didn't differ between these treatments, the outcomes of patients with untreated chondral lesions had not been compared to those of patients with no lesions to begin with. This left open the question of how the mere presence of chondral lesions affects the results of the surgery. To answer this, the team separated the patients based on whether they had untreated lesions or no lesions at all and compared their scores on surveys assessing knee pain and function. The patients without chondral lesions showed better postoperative outcomes across the board, with reduced symptoms, better knee function, and better quality of life at 1 year after surgery than those with lesions that had gone untreated. Those with no lesions also showed better postoperative range of motion. Perhaps the most interesting finding was that these scores weren't significantly different between the groups prior to surgery. The presence of chondral lesions alone didn't seem to cause symptoms: it was only after APM that the lesions made their presence known. These results suggest that careful preoperative evaluation of whether a patient has chondral lesions can inform on the best surgical options for treating the knee. By understanding how the lesions affect healing from APM, medical teams can be better prepared to manage patients presenting with this condition.