

[Long-term results after gluing of osteochondral fragments and osteochondrosis dissecans]. [German]

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Abstract:

Long-term results after surgical treatment of osteochondritis dissecans of the talar dome and joint knee are dependent on the stage of cartilage damage, the age at operation and on the surgical technique. In cases of osteochondritis dissecans of the talar dome the only loosening of a refixed osteochondral fragment was seen after glueing with acrylate. Using the classification of Arcq in 59.6% an excellent and in 18.3% a good result was observed in cases of osteochondritis dissecans at the femoral condyles. In regard to the development of osteoarthritis in 56% no signs of osteoarthritis were visible. Worst results were obtained in knee joints in which acrylate glue was used for refixation of the osteochondral fragments. In conclusion we recommend the use of fibrin glue for refixation of osteochondral fragments in cases of osteochondritis dissecans even when early mobilisation follows the operation. Because of the long-lasting resorption and barrier effect to ingrowing tissue the use of cyanoacrylate should be avoided.