Soccer

Endoscopic debridement and fibrin glue injection of a chronic Morel-Lavallée lesion of the knee in a professional soccer player: A case report and literature review

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Abstract

A Morel-Lavallée lesion is a post-traumatic closed degloving injury of soft tissue. The lesion is due to a shearing trauma with separation of subcutaneous tissue from underlying fascia. When conservative treatment fails, surgical treatment is imperative. Commonly, open drainage and debridement is performed. This case report describes a Morel-Lavallée lesion of the knee in a professional soccer player who was successfully treated with endoscopic debridement and fibrin glue injection after failure of conservative management. This method achieves the goal of an open surgical debridement without exposing patients to an increased morbidity.

Sutureless tension-free hernia repair with human fibrin glue (tissucol) in soccer players with chronic inguinal pain: initial experience

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Abstract

Chronic groin pain is a common symptom experienced by soccer players, resulting in many athletes undergoing prolonged periods of conservative treatment. In a high proportion of these cases, however, the cause of groin pain is due to impalpable hernias, thus nullifying the usefulness of a conservative approach. Of the current surgical procedures for inguinal hernia repair, the Lichtenstein technique is widely used. The present study aims to evaluate the efficacy of mesh fixation with human fibrin glue (Tissucol) in open, tension-free inguinal repair, in the treatment of soccer players with groin hernia. A sutureless Lichtenstein technique was employed in 16 consecutive soccer players with primary groin hernia. Inguinal nerves were prepared and preserved. Human fibrin glue was used for mesh fixation, in

place of conventional sutures. Results were rated as excellent in all cases, with no reported intra- or postoperative complications. All patients were discharged 4 - 5 h after the operation, and all returned to full pre-injury level sporting-activity, on average, 31 days (range 24 - 42 days) post surgery. This study confirms the efficacy of sutureless tension-free hernia repair with human fibrin glue for the treatment of soccer players suffering from chronic groin pain due to impalpable groin hernia.

AMIC Cartilage Repair in a Professional Soccer Player

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Abstract

We report a case of a professional soccer player suffering from a traumatic cartilage lesion grade IV according to the Outerbridge classification at the femoral condyle treated with an enhanced microfracture technique (AMIC). Autologous Matrix-Induced Chondrogenesis (AMIC) is an innovative treatment for localized full-thickness cartilage defects combining the well-known microfracturing with collagen scaffold and fibrin glue. Because of the cartilage lesion (3 cm(2)), an AMIC procedure was performed followed by a rehabilitation program according to the protocols in the literature, (Steadman et al.; 2003). After 8 months of rehabilitation, the player returned to team training and after 10 months to competition. Altogether he returned to the same skill level for almost one year after the index operation. He is very satisfied with the clinical results after AMIC, which corresponds with the Lysholm score of 90 points at 12 months.