

Diagnosis

Anterior Cruciate Ligament Rupture

What to expect?



Cruciate Ligament Rupture

The injury

Causes

A tear (rupture) of the cruciate ligament is the most frequent ligament injury of the knee joint. Almost three-quarters of all cruciate ligament ruptures occur during sports, mostly upon simultaneous bending and twisting of the knee.

Associated injuries

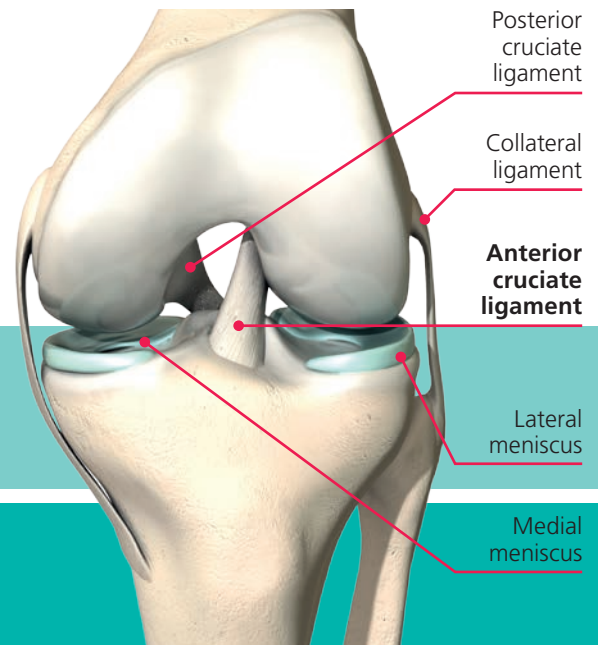
Cruciate ligament ruptures are often accompanied by other injuries of the knee joint, namely damage to the menisci, to the cartilage or to the collateral ligaments.

Consequences

Rupture of the anterior cruciate ligament renders your knee unstable. Due to continuing unreliability and instability of the knee joint, there is a significantly increased risk of serious secondary meniscus and cartilage injury.

Diagnosis

For diagnosis of the rupture, the attending physician will examine your knee by performing stability tests. If any injury is suspected, he or she will make an appointment for magnetic resonance imaging (MRI) for you. For this examination, you are moved into an MRI machine on a stretcher. The examination usually takes 20–30 minutes. Then you can resume your normal activities.





Treatment methods

Conservative therapy

If you as the patient feel that your knee is sufficiently stable even after the rupture, this is the optimal starting situation for successful conservative therapy. The goal is to improve knee stability for everyday life by systematic training of the thigh muscles.

Loss of working time

On average 1–2 weeks will elapse until the swelling of the knee has subsided and you as the patient are free of pain again. Then you can resume your daily work, individually and depending on your occupation.

Sports

Once you are free of pain, you can start physiotherapy and strength training. The time when you can fully do sport again will depend on the condition of the knee stability and on your sport.

Time of treatment

Immediately after diagnosis



Treatment methods

Surgery – preservation of the cruciate ligament with Ligamys®

Ligamys is a new treatment method for preserving the natural cruciate ligament. Here, the knee is stabilised dynamically by means of an implant, so that the torn cruciate ligament ideally heals again and thus regains its full function. In this treatment, no removal of a tendon from the patient's body is required. Ideally, the functions of depth perception are maintained, which are particularly important for coordination and responsiveness.

Loss of working time

Clinical data show that Ligamys patients are often able to resume work earlier than patients who have under-gone cruciate ligament reconstruction. Resumption of work is possible after an average of 3 weeks.

Sports

After a Ligamys operation, light sports without stress are fully possible again after about 6 months (e.g. cycling, swimming, and jogging). Contact sports with changes of direction should, however, not be practised earlier than 9 months after surgery, depending on the rehabilitation status.

Time of surgery

No later than 21 days after the rupture



Treatment methods

Surgery – cruciate ligament reconstruction using a tendon

In this method, the torn cruciate ligament is removed and replaced by an endogenous or foreign tendon. Cruciate ligament replacement is a suitable approach if you need to rely on a stable knee due to your level of activity, if cruciate ligament preservation with Ligamys is not possible, or if knee stability cannot be adequately restored with conservative treatment or the Ligamys implant.

Loss of working time

Experience has shown that you will be able to resume work after 3 weeks on average. Resumption of work requires a successful healing process and depends on whether you have a desk job or a physically stressful occupation.

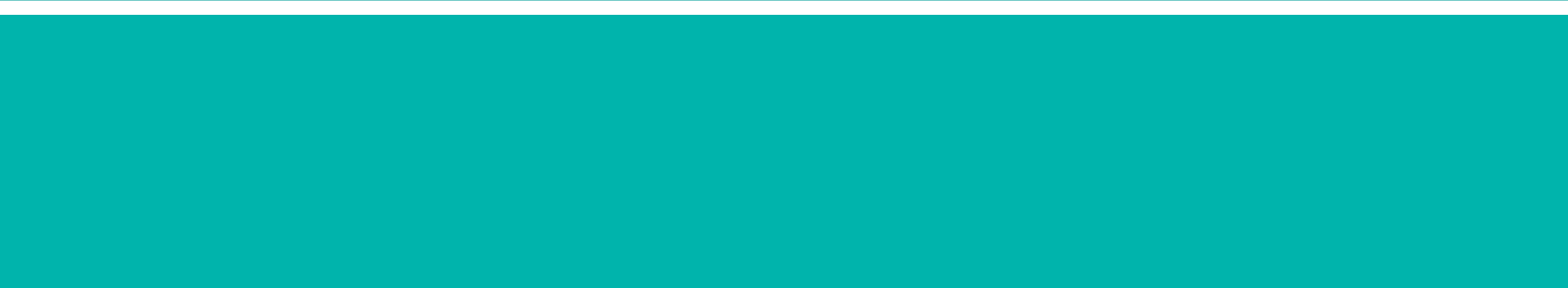
Sports

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Time of surgery

According to consultation with the physician





For further information
on the subject of cruciate ligament
rupture please contact:

www.ligamys.com

