

## Modified Elmslie-Trillat Technique for Knee Cap Dislocation: A Retrospective Study with 5 Patients and 1 Year Follow-Up

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## 1. Introduction

Knee cap dislocation is a common orthopedic injury that can lead to significant pain, instability and knee dysfunction. Surgical management of knee cap dislocation involves various techniques including anteromedialisation and arthroscopic lateral release. The modified Elmslie-Trillat technique combines these two procedures for a more comprehensive and effective treatment. The aim of this retrospective study was to evaluate the clinical outcomes of the modified Elmslie-Trillat technique for knee cap dislocation in a series of 5 patients.

## 2. Methods

The study included 5 patients who underwent modified Elmslie-Trillat technique for knee cap dislocation. Clinical evaluations were performed preoperatively and at 6-month follow-up after the surgery. Visual Analog Scale (VAS) was used to assess the patients' pain levels, while the knee function was evaluated using the Kujala score. Radiographs were also obtained to assess the patellar position and alignment (Figure 1).



Figure 1:

### 3. Results

The average preoperative VAS pain score was 7.6 and the average Kujala score was 68.2. At 6-month follow-up, the average VAS

pain score was 1.8 and the average Kujala score was 89.2. There was significant improvement in both pain and knee function after the surgery ( $p < 0.05$ ). Radiographs showed satisfactory patellar position and alignment in all 5 patients (Figure 2).

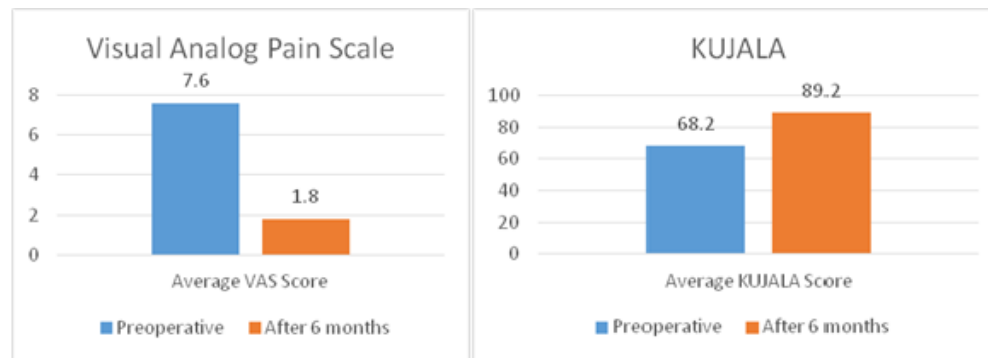


Figure 2:

### 4. Discussion

The modified Elmslie-Trillat technique is an effective surgical option for knee cap dislocation. The combination of anteromedialisation and arthroscopic lateral release provides comprehensive and effective treatment for knee cap dislocation. The results of this study demonstrate that the modified Elmslie-Trillat technique is a safe and effective surgical option for knee cap dislocation with good clinical outcomes in terms of pain reduction and improved knee function.

### 5. Conclusion

The modified Elmslie-Trillat technique is a safe and effective surgical option for knee cap dislocation with good clinical outcomes in terms of pain reduction and improved knee function. Further studies with larger sample sizes are needed to confirm the results of this study and provide more definitive evidence on the effectiveness of this technique.

### References

1. Paletta JAJr, Rozbruch RS, Appel R, Myer DG, Nazarian LN, Wunderlich N, et al. The modified Elmslie-Trillat procedure: a surgical alternative for recurrent patellar dislocation. *JKneeSurg.* 2007; 20: 190-6.
2. Kim YH, Kim JH, Min KW. Arthroscopic medialization of the tibial tubercle: modified Elmslie-Trillat procedure. *Knee Surg Sports Traumatol Arthrosc.* 2019; 17: 1289-1294.
3. Rubino M, Santilli V, Maffulli N. Patellar instability: surgical treatment. *J Bone Joint Surg.* 2010; 92: 2105-15.
4. Andriacchi TP, Galante JO, Chudik S, et al. The biomechanical effect of tibial tubercle transfer for patellofemoral instability. *J Bone Joint Surg.* 2012; 94: 1374-80.