Khalaf Ahmed Moussa Dr. med.

Shaving in Chondromalacia Patellae – Retrospective Study

Geboren am 05.03.1960 in Kairo/Ägypten Reifeprüfung am 01.07.1978 in Kairo/Ägypten Studiengang der Fachrichtung Medizin vom WS 1978 bis WS 1984 Physikum am 01.10.1979 an der Universität Kairo/Ägypten Klinisches Studium in Kairo/Ägypten Praktisches Jahr in Kairo/Ägypten Staatsexamen am 15.11.1984 an der Universität Kairo/Ägypten

Promotionsfach: Orthopädie Doktorvater: Prof. Dr. med. G. Rompe

Chondromalacia of the patella represents an ongoing challenge for the orthopaedic surgeon. Shaving and/or drilling may be beneficial and may even lead to long term remission in stage II or III of Outerbridge's classification (1961). In a retrospective study, a total of 63 patients (46 male, 17 female) were followed up. The patients were divided into two groups. Group I (n = 38) comprised patients having undergone arthroscopic shaving and group II (n = 25) comprised patients having undergone open shaving combined with drilling or lateral release. The mean age (± SD) at the time of the operation was 38 (\pm 14) and 40 (\pm 16) years. The follow up periods (\pm SD) were 6.3 (± 1.5) and 9.4 (± 2.4) years for each group respectively. Good to excellent results were noticed in 71 % in group I and in 52 % in group II. The longer the follow up period the worse the results. Subjects < 40 years-old showed better outcomes. Cybex 6,000 isokinetic testing revealed weakness of the quadriceps musculature which was speed specific and associated with poor outcomes. The hamstrings/quadriceps (H/Q) ratio is not a good indicator of the patient's long term outcome. No correlations were found between sex, grade of chondromalacia, side involved and outcome. This results indicate that shaving in chondromalacia patella is an effective procedure in young patients. Furthermore, long term progressive rehabilitation emphasising increase hamstring and quadriceps strength in particular improves the outcome.

Key words: Chondromalacia patellae, shaving, Cybex 6,000