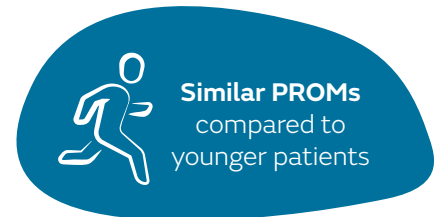
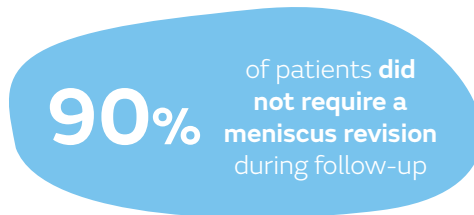


Success rates and patient-reported outcome measures (PROMs) of meniscal repair in older patients (≥40 years) are similar to or better than those observed in younger patients

Getgood A, Saunders C, and Sedgwick M. Meniscal repair as a solution in “older” patients: a systematic literature review with meta-analysis. Poster presented at: International Society of Arthroscopy, Knee Surgery and Orthopaedic Sports Medicine (ISAKOS) Congress 2023; June 18–21, 2023; Boston, Massachusetts, USA.

Key points

Meniscal repair in older patients demonstrated:

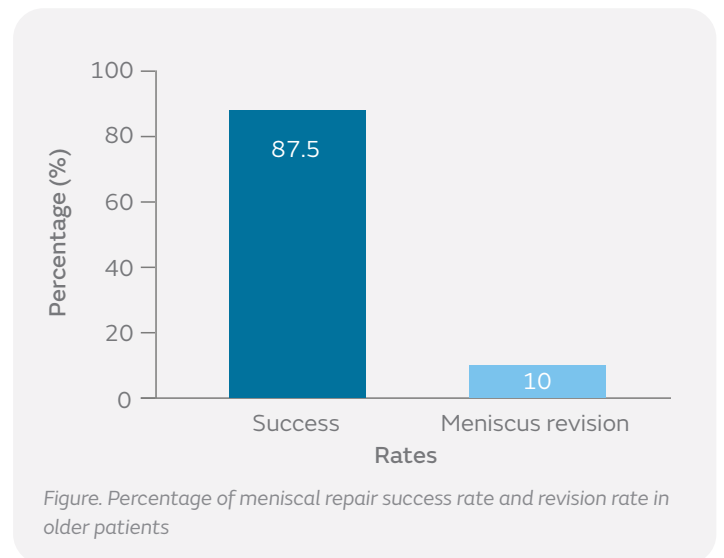


Overview

- Systematic literature review with meta-analysis to establish the success rates and patient outcomes of meniscal repair in older patients (≥40 years) versus younger patients (<40 years)
- Studies came from two previous systematic literature reviews and a search on Embase and PubMed from 1 January 2017 – 29 September 2021 with search terms (“meniscus repair” OR “meniscal repair”) AND (age OR old OR older)
- In total, 16 articles were included and comprised 7 retrospective cohort studies, 5 retrospective case series studies, 3 prospective case series studies and 1 retrospective case-control study
- Outcomes included meniscal repair failure rate (defined by each study), meniscus revision rate (second meniscus repair or meniscectomy) and PROMs

Results

- In older patients:
 - the operation success rate was 87.5% (95% confidence interval [CI]: 8.0–19.1; Figure)
 - meniscus revision was not required in 90% of patients during follow-up (Figure)
- Risk of meniscal failure and meniscal revision was significantly reduced in older patients compared with younger patients:
 - Meniscal failure; 40% reduction (RR 0.60; 95% CI: 0.44–0.83; p=0.002)
 - Meniscal revision; 40% reduction (RR 0.60; 95% CI: 0.43–0.84; p=0.003)
- Post-operative PROMs in older patients reported:
 - Lysholm score was rated ‘good’ (86.7; 95% CI: 81.7–91.7) which was similar to younger patients (mean difference 2.4; 95% CI: 4.7–9.2)
 - International Knee Documentation Committee (IKDC) score was 76.9 (95% CI: 69.2–84.5)



Conclusions

Meniscal repair in older adults has similar or better success rates and similar PROMs compared with younger patients. Therefore, age should not be the sole determining factor when selecting to perform this procedure.

Considerations

Included studies may have a selection bias, with older patients being selected with tears that have a higher likelihood of success.