

Treatment of Degenerative Meniscus Tears

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Abstract: Degenerative meniscus tears are generally atraumatic and a normal part of aging. They are typically observed in middle-aged or older people. Tears are often associated with knee osteoarthritis and degenerative changes. The medial meniscus is most commonly torn. The tear pattern is normally complex with significant fraying but other tear patterns, such as horizontal cleavage, vertical, longitudinal, and flap tears, as well as free-edge fraying are also observed. The onset of symptoms is usually insidious although the majority of tears are not symptomatic. Initial treatment should always be conservative and include physical therapy, NSAIDs, topical treatment, and supervised exercise. In overweight patients, weight loss can decrease pain and improve function. Injections, including viscosupplementation and the use of orthobiologics, can be considered in the presence of osteoarthritis. Several international orthopaedic societies have issued guidelines for progression to operative management. Mechanical symptoms of locking and catching, acute tears with clear evidence of trauma and persistent pain with failure of nonoperative treatment are considered for operative management. Arthroscopic partial meniscectomy is the most commonly performed treatment for most degenerative tears. However, repair is considered for appropriately selected tears, with special emphasis on surgical technique and patient selection. Treatment of chondral pathology at the time of surgery for meniscus tears is controversial, although a recent Delphi Consensus statement concluded that debridement of loose cartilage fragments may be considered.

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Arthroscopy

The Journal of Arthroscopic and Related Surgery



Overview

- ➔ May occur as a normal part of aging
- ➔ Some tears may be asymptomatic whereas others may cause mechanical symptoms
- ➔ Often associated with chondral degenerative changes
- ➔ Most frequently affect the posterior horn of the medial meniscus

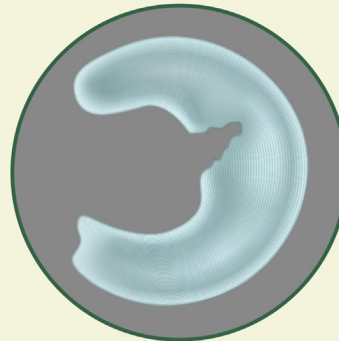
Non-Surgical Treatment

- ➔ Activity modification
- ➔ Oral medication (NSAIDs and/or acetaminophen), topical therapies and/or physical therapy
- ➔ Consider intra-articular injections

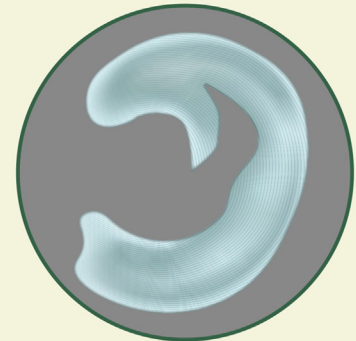
Indications for Surgery

- ➔ Failure of non-surgical treatment for at least 6 weeks in carefully selected non-arthritic patients **and**
- ➔ "Mechanical symptoms" that correlate with provocative physical examination maneuvers

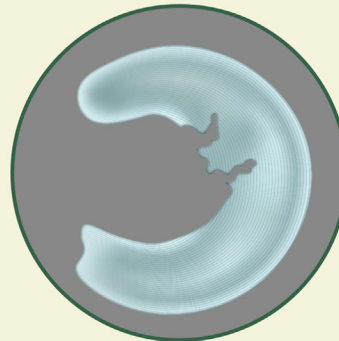
Common Meniscal Tear Patterns



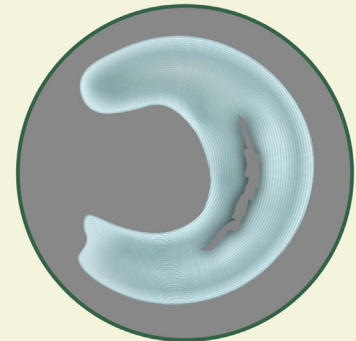
Radial



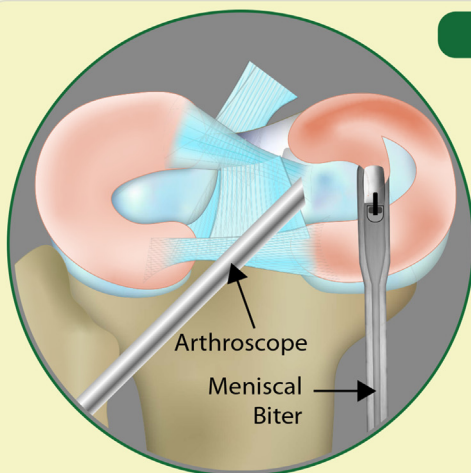
Parrot-Beak



Complex



Vertical



Right Knee Partial Medial Meniscectomy

Arthroscopic Surgery

- ➔ Minimally invasive surgery
- ➔ Degenerative meniscus tears are usually treated with arthroscopic partial meniscectomy although some tears may be amenable for repair
- ➔ Associated treatment of chondral defects may be necessary
- ➔ Return to activities is generally permitted when swelling subsides and there is adequate quadriceps strength

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Abstract and disclosure of potential author conflicts of interest are available at <https://www.arthroscopyjournal.org/infographiclibrary>