

Lateral Ligament Complex Reconstruction After Proximal Fibula Tumor Resection: All-Suture Anchor Technique

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Tumor resection at the proximal fibula is complicated by nearby ligamentous structures that must be sacrificed, resulting in lateral knee instability and diminished functional outcomes. Historically, the residual attachments of these structures were merely re-attached to nearby soft tissue, and patients required prolonged immobilization. This video discusses the use of nonmetallic all-suture anchors to reconstruct the lateral knee after proximal fibula tumor resection.

The case presentation of a patient who underwent proximal fibulectomy for oncologic resection is reviewed. The lateral collateral ligament and the biceps femoris tendon were reconstructed to the proximal tibia with the use of suture anchors to re-create the lateral ligament complex and maintain knee stability. At 1-year and 18-month follow-up, the patient was able to ambulate without pain or gait abnormalities and had a stable knee.

Repair of the lateral collateral ligament and tenodesis of the biceps femoris tendon to the proximal tibia with the use of all-suture anchors effectively re-create the lateral ligament complex and afford early clinical and functional knee stability in patients undergoing proximal fibulectomy.