

## TOCA Tips: ACL Injuries

The ACL, or anterior cruciate ligament, is critical for maintaining anterior/posterior and rotational stability of the knee. ACL ligament tears are common in cutting and twisting sports, and are most commonly the result of an extension, non-contact injury when pivoting or landing. Female athletes are predisposed to ACL tears due to many reasons, including different kinematics of the knee, altered landing mechanics, altered muscular forces of the leg, and hormonal changes. Patients with ACL tears have instability with activities with the sensation of the knee shifting or giving way. The diagnosis of an ACL tear is made by a history and physical exam tests. An MRI can be used to confirm an ACL tear and look for additional intra-articular pathology such as meniscal or chondral damage.

Surgery is indicated for ACL tears if the patient has functional instability and desires to return to higher impact sporting events. There are several techniques to reconstruct a torn ACL, including many different graft options. Typical grafts to reconstruct the ACL include patellar tendon autograft, Hamstring autograft, or allograft tissue. It is controversial about the best graft choice, and the decision is based on sport, activity level, age, and physician experience. Following aggressive rehabilitation, patients can typically return to full sporting activities within 6 to 9 months.