

Arthroscopic Repair of Separation of Anterior Intermedial Ligament: Case Report

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Objectives: Aim of this article is to present and discuss a patient with separation of anterior intermedial ligament which was repaired arthroscopically.

Methods: Anterior intermedial ligament (AIML) (transverse geniculate ligament or anterior transvers ligament) is an intraarticular structure connecting anterior convex edge of lateral meniscle to anterior tip of medial meniscle; limits anterior movement of menisci during extension and prevents pressure application of condylar surfaces onto menisci; and also limits anterior-posterior separation of anterior horn of medial meniscus during low degrees of flexion. AIML was found in 69 to 94 percent in different studies.

Results: A thirty-eight year-old female patient referred our clinic with complaints of pain in right knee for a year that responds to pain killers, increasing with climbing stairs and decreasing with rest. Synovium originated mass was seen on MRI with contrast applied after an intraarticular mass seen on MRI. She underwent surgery and the mass in the medial of joint space considered as pigmented villonodular synovitis was resected arthroscopically. During arthroscopy, separation of anterior margin of AIML and elevation of anterior horns of both medial and lateral were noticed. Using no 1 PDS suture AIML was pulled downwards from anterior margin and fixed. After fixation AIML and anterior horns of menisci replaced on tibial plateau again.

Conclusion: As injuries of AIML which has an important role at stabilization of menisci during knee motions are seen very rarely, frequency of AIML was reported 9.75 percent in a cadaver study and 75 percent of them was accompanied by medial meniscal tear. We could not find any other clinical study reporting AIML injury in the literature. As we apply arthroscopical intervention in order to resect intraarticular mass considered as pigmented villonodular synovitis, anterior separation of AIML and elevation of anterior horn of both menisci were noticed coincidentally and then were repaired. As the arthroscopical evaluation due to injuries of intraarticular structures is performed, AIML should also be evaluated, if necessary, repair should be performed in order to obtain stabilization of anterior horns of menisci.

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