

## Osteochondral lesions of the talus: clinical and functional assessment of conservative vs scope treatment

Maximiliano Ibáñez, MD<sup>1</sup>; Ana Belén Calvo, MD<sup>2</sup>; Victoria Alvarez, MD<sup>3</sup>; Salvador Léopore, MD<sup>4</sup>.

<sup>1,2,3,4</sup> Instituto de Ortopedia Traumatología Dr. Jaime Slullitel, Sanatorio de la Mujer. Dirección: San Luis 2534. Rosario. Argentina.

### Introduction

Osteochondral injuries involving the ankle joint are unusual (incidence of 0.09% according to Berndt and Harty), third in frequency after knee and elbow location. They are described as a cause of chronic pain after ankle sprains in the active population (thought to occur in 2-6% of sprains). MRI is the gold standard diagnostic method. Therapeutic strategies include both conservative and surgical treatment. The aim of our study was to evaluate the clinical and functional outcome of patients with osteochondral lesions of the talus.

### Materials and Methods

We retrospectively reviewed 20 patients with osteochondral lesions of the talus treated in our department between January 2007 and December 2012. Sixty per cent were male with an average age of 42 years. Eleven patients were treated conservatively, one of them had clear surgical indication (LOC G III, as classified by Ferkel and Sgaglione) but refused to perform the procedure. Nine patients underwent arthroscopic surgery (debridement and microfracture), one of the procedures was a review of an arthroscopy performed in another service. No open surgery was performed. Clinical and functional evaluation was performed using the AOFAS score, Freiburg and VAS Score System.

### Results

Non-surgical treatment group had a pretreatment average AOFAS score of 58, which improved to 74.8 points; a Freiburg Score System that ranged from 65 to 79.3 points and a VAS average of 5.4. AOFAS surgical treatment group improved from 54.3 to 84.8 points, Freiburg Score System ranged from 60.6 to 81.4 points and VAS average was of 5.8.

### Discussion

It is difficult to compare our results with other series of patients, because we made a comparison between conservative versus arthroscopic treatment, while other authors show results obtained when performing certain surgical technique. Although surgical treatment has better results, we agree with the literature that conservative treatment presents acceptable results and should always be considered as the first option.

---

The Orthopaedic Journal of Sports Medicine, 2(12)(suppl 4)

DOI: 10.1177/2325967114S00247

©The Author(s) 2014