

#### **DR. THOMAS COMFORT**

# **ANTERIOR CRUCIATE LIGAMENT TEAR OF THE KNEE**

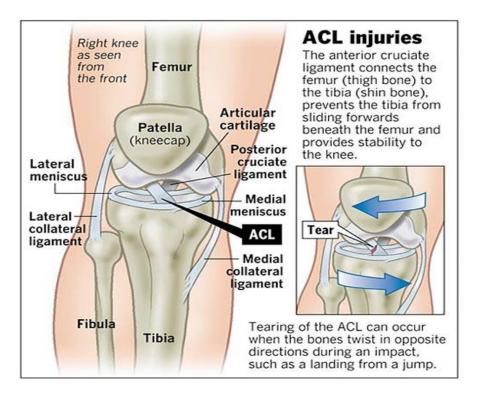
#### What is the anterior cruciate ligament?

The anterior cruciate ligament (**ACL**) is one of the four main stabilizing ligaments in the knee. The ACL connects the lateral femur (thigh bone) to your medial tibia (shin bone). These attachments allow the ACL to resist forward motion and rotation of the tibia, in relation to the femur.

### How does the anterior cruciate ligament tear?

ACL tears are among the most common injuries involving the knee. The anterior cruciate ligament can be injured in several ways with or without direct contact to the knee:

- Changing direction rapidly
- Stopping suddenly
- Slowing down while running
- Landing from a jump incorrectly
- Direct contact or collision, such as a football tackle



### What does surgery involve?

ACL reconstruction surgery is an outpatient procedure (you will go home the same day after your procedure). You will be asleep for this procedure (general anesthetic). Dr. Comfort will evaluate your knee under anesthesia for stability and knee arthroscopy confirms your ACL is torn and allows evaluation of any other injuries to your knee. During an arthroscopy, a miniature camera is inserted through three small incisions (portals) on your knee. This provides a clear view of the inside of the knee and allows Dr. Comfort to insert miniature surgical instruments through those portals to reconstruct your knee with the new ACL bone tendon bone (BTB) graft. The tissue to replace your damaged ACL will come from your own body (autograft) or from a cadaver donor (allograft). The procedure will take 60-90 minutes.



What can I expect after surgery?

**Walking**: You may be up and around using pain as a guide. You can put light pressure on the operated foot. As your pain improves, you may increase the amount of pressure on your leg until you are bearing full weight.

- **Crutch use**: You may need them full time except to shower for the first 2 weeks. Wait until you are in therapy and are developing some good control of the leg before you discontinue the crutches. If you go around without any protection, you could slip and injure yourself.
- **Driving**: You may drive 48-72 hours after surgery if you are not taking narcotic pain medication and are able to put pressure on the leg with minimal pain.

## PHYSICAL THERAPY: You will need to attend outpatient physical therapy to restore your knee motion and strength. Therapy is recommended initially twice a week and can last 3-6 months depending on individual progress and goals.