



OSTEOCHONDRITIS DISSECANS PROCEDURE

Osteochondritis dissecans occurs when there is separation of an articular cartilage subchondral bone segment from the remaining articular surface.

It occurs most commonly in the knee with the medial femoral condyle the most common site.

Surgery is indicated when lesions are unstable. Internal fixation is then required to fix the loose fragment into position. A second operation is needed to remove the fixation material when there is evidence of radiological union.

Post-op

CPM applied 48 hours post-op.

Static quads.

Inner range quads.

Knee flexion.

Calf stretches.

Non-weight bearing.

2-6 weeks

Continue non-weight bearing.

Increase range of movement.

Hip abduction/extension.

Quads and hamstring stretches.

Bike – no resistance.

6 weeks +

Gradually increase weight bearing to full.

Add weight to exercises.

Progress to weight bearing exercises.

No impact activities or sports permitted until fixation material has been removed.

3-9 months

Readmission after x-ray shows healing.

Removal of fixation by operation, keyhole if possible or maybe open. Usually day case.

10-14 days for wounds to heal then return to all desired activities.

Long term follow-up with postal surveys +/- x-rays.

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Date last reviewed

May 2006

Ratified by:

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