

KNEEDING HELP: A CASE OF PATELLA KNEE AVULSION IN A YOUNG RENAL FAILURE PATIENT

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Introduction: Patellar tendon rupture refers to a disruption of the patellar tendon while patellar tendon avulsion refers to a forcible separation or detachment of the patellar tendon. While there were numerous reports of patellar tendon ruptures and repair methods in end stage renal failure (ESRF) patients, none of whom were young patients with high energy daily lifestyle. Most cases are ruptures and not total avulsion cases and the mean age of 52.78 years [1], thus making our case rare as it involves the avulsion of the tendon from the tibial tuberosity and the age for our patient is considerably young thus the nature of his higher energy activities plays an important role in our approach to his surgical treatment and rehabilitation

Discussion: The approach chosen for our patient was the internal bracing method. By using two (2) fiber-optic anchor sutures and which was protected with a cylinder cast for three (3) months post operatively. Upon removal of cast, initial range of motion was limited to 10 to 60 degrees but with assistance of our sports physician, an aggressive regime was planned out till his full recovery at six (6) months post operatively. Patient had given Knee Injury and Osteoarthritis Outcome Score (KOOS) at trauma, post operatively at 1 month, 3 months, 6 months and finally at 1 year post operatively, showed significant improvement in all five (5) subcategories at 1 year post trauma

Conclusion: The choice of internal bracing and adequate protection post operatively and aggressive rehabilitation yields a satisfactory outcome for our patient. In the end, it is not in how fast or how perfect the attachment is but on how soon can he or she return back to his normal routine. He was KNEEDing help and we have positively delivered.