

## **ACL Reconstruction In Seasoned Athletes – Patient Selection, Preparation, Tips And Pearls**

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The presentation seasoned athletes with ACL injury can be divided into true new injury vs chronic ACL with new symptom ie pain.

Age is no longer a major criterion for ACL reconstruction. More importantly presenting symptom, patient's activity level, expectation and most importantly associated pathologies need to be taken into consideration. Pre-operative evaluation include weight bearing long film to look at alignment.

Surgical technique does not differ much compared to the younger patients. My personnel preference is trans-portal anatomical ACL reconstruction with hamstring autograft, remnant preserving when possible. I do pay attention to the size of the graft, sometimes tripling or even quadrupling when the length is adequate. Occasionally I choose BTB or allograft. It is important to address the cartilage lesions. I am less aggressive with meniscus repair with these patients. It may be necessary to prepare for High Tibial Osteotomy when alignment is an issue.

It is important to prepare patient for longer rehabilitation. Also important to discuss with patients the possibility of post op prolonged pain and osteoarthritis management.