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'Watch' helps surgeons minimize potential risks of all-inside meniscal repair

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JBJS Case Connector, an online case report journal published by The Journal of Bone and Joint Surgery, has issued a "Watch" regarding potential risks with anchor-based all-inside meniscal repairs. While all-inside techniques have many advantages, including shorter surgical time and reduced risk of damage to neurovascular tissues, potential drawbacks include risks of local soft-tissue irritation and implant migration or breakage.

In particular, the "Watch" offers important tips for successfully using FAST-FIX meniscal-repair devices produced by Smith & Nephew. This "Watch" is based on a July 22, 2015 *JBJS Case Connector* report by Rauck et al. The authors present two cases in which FAST-FIX anchors came loose postoperatively, causing knee pain within two to six months after anchor placement. In the first case, a meniscal anchor came undone and lodged near the anterior horn of the medial meniscus, while in the second case, an implant became lodged underneath the anterior horn of the lateral meniscus.

While the "Watch" recognizes the many potential benefits of all-inside meniscal repair and general success with FAST-FIX, these cases indicate the need to consider the possibility of loose anchors in patients who present postoperatively with pain and mechanical symptoms. Perhaps the most important key to success is to use FAST-FIX in areas of the meniscus that provide strong holding tissue. According to Tim Spalding, FRCS, an experienced FAST-FIX user at the University Hospital in Coventry, England, the best grip site for anchors is the posterior third of

the medial meniscus, while tears of the lateral meniscus near the popliteal hiatus represent the biggest grip-hold challenge.

"The publication of 'Watches' helps fulfill our mission to serve the orthopaedic community," commented Marc Swiontkowski, MD, editor of *JBJS Case Connector*. "The 'Watch' designation may encourage the orthopaedic community to either demonstrate that these are isolated, unrelated cases or sharpen the focus further by rigorously evaluating the intervention and/or reporting related cases."

Provided by Journal of Bone and Joint Surgery