Sean O'Leary

National Ligament Registry outcomes

for primary Anterior Cruciate Ligament reconstruction

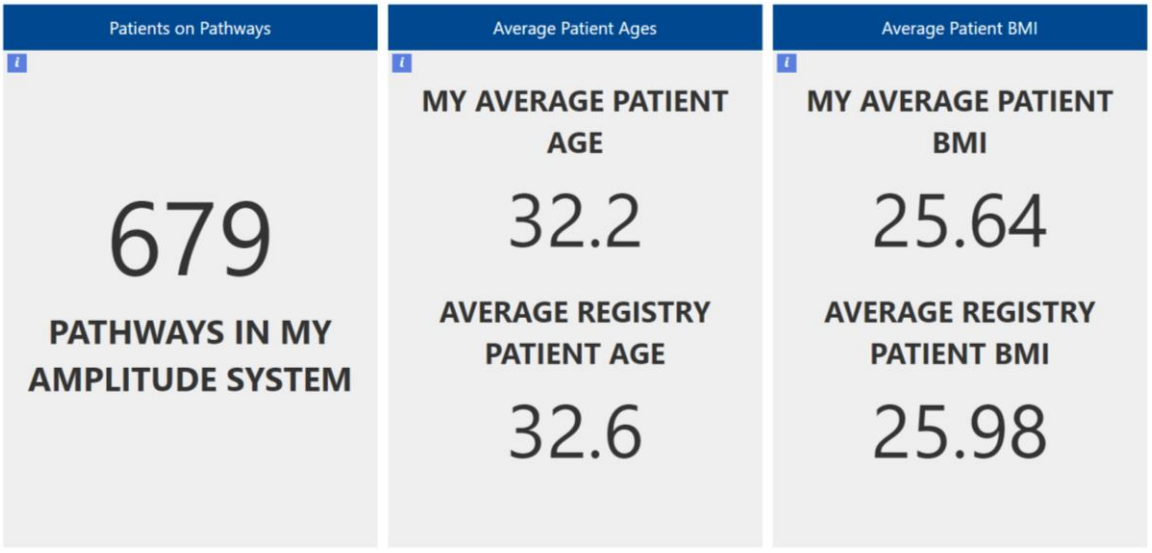
(for period to February 2020)

The data below is extracted from the (UK) National Ligament Registry and can be used to:

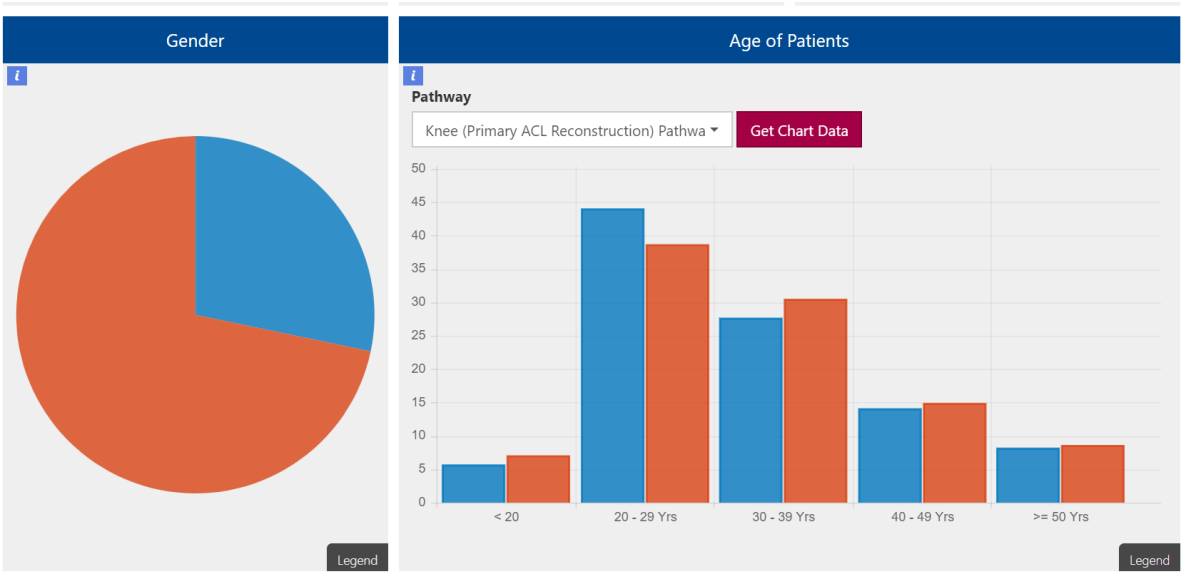
- Validate the number of ACL reconstructions that I have performed (since the Registry was established in 2013)
- Review what graft types I have used and any additional procedures I have undertaken
- The outcomes of those procedures (compared to the national average recorded on the Registry)

Demographics

(numbers, age, size)



My average age and size (!) of patient is almost identical to the national averages.

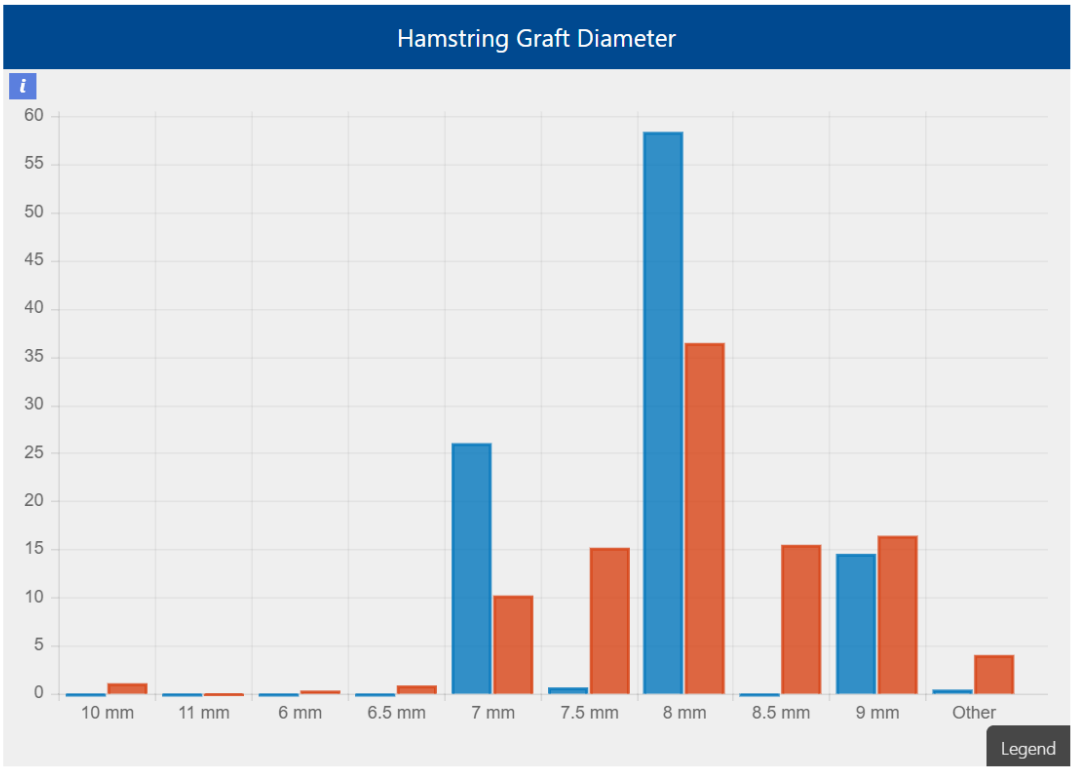


About 2/3 of my patients are male, mostly footballers and rugby players!

The spread of ages is seen on the right and once again reflects the national picture. I am blue. National data is orange.

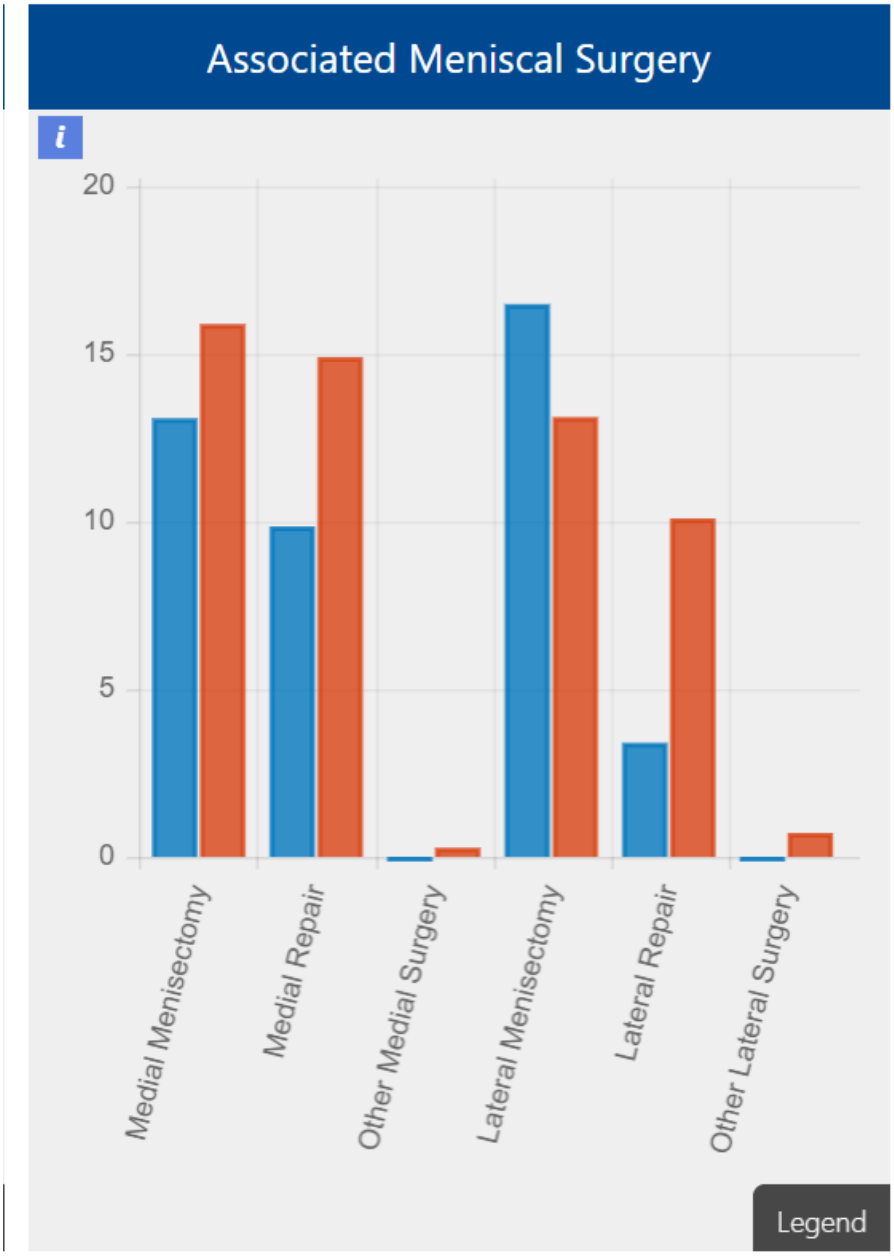
Graft type and size

I usually use the medial (inner) hamstrings as my source of graft (2 hamstrings doubled over to make a '4 strand' graft). The different sizes I have inserted are shown below …



Meniscal surgery

Meniscal tears are commonly associated with patients who have sustained an ACL rupture. These tears may either be excised (meniscectomy) or if appropriate repaired.



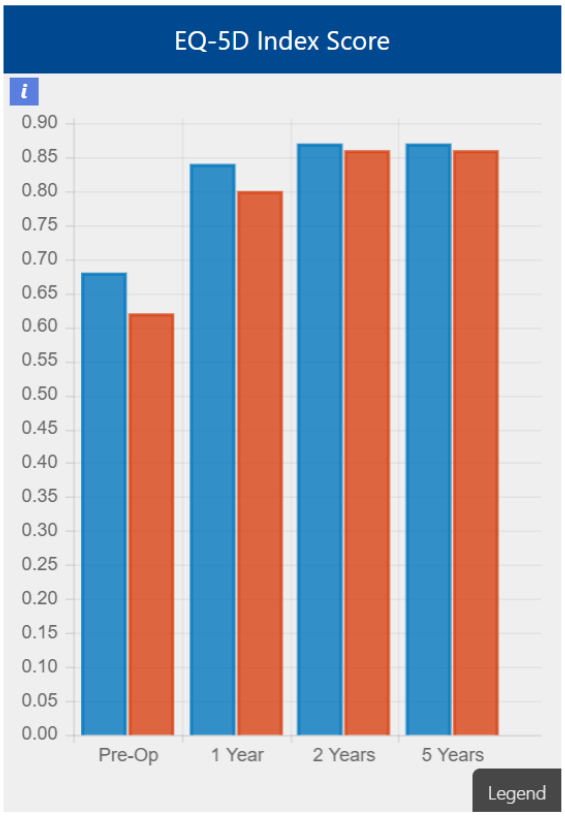
OUTCOMES OF SURGERY

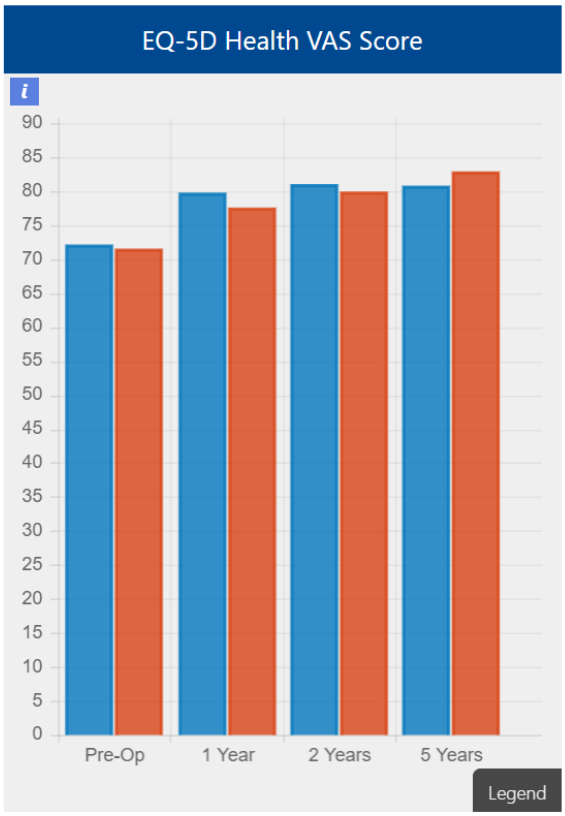
The ‘outcome’ is dependent on several factors and is important (and often different) for patients, surgeons and healthcare providers.

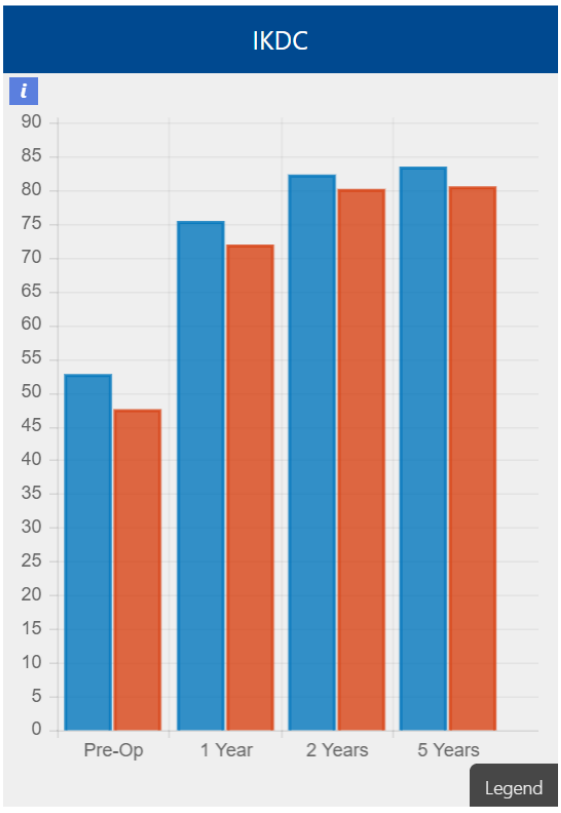
Return to sport and graft re rupture are 2 parameters that can be compared but are often difficult to accurately record. The National Ligament Registry uses the Knee injury and Osteoarthritis Outcome Score (KOOS) as the main representation of patient function before and after surgery. This has 5 subsections to accurately record all facets of ‘function’ and is commonly represented as a graph.

When reporting “2 standard deviations from registry average” this means that 95% of all the registry outcomes lie within the yellow (2 SDs below) and red (2 SDs above) lines. Reassuringly it can be seen that my KOOS outcome line (blue) lies within both these lines and significantly closer to the above average outcome line.

Other functional scores recorded are the IKDC and EQ-5D (a more generic health score). Once again it can be seen that I compare favourably with the national data


EQ-5D Index Score
0.90
0.85
0.80
0.75
0.70
0.65
0.60
0.55
0.50
0.45
0.40
0.35
0.30
0.25
0.20
0.15
0.10
0.05
0.00
Pre-Op
1 Year
2 Years
5 Years
Legend


EQ-5D Health VAS Score
90
85
80
75
70
65
60
55
50
45
40
35
30
25
20
15
10
5
0
Pre-Op
1 Year
2 Years
5 Years
Legend


IKDC
90
85
80
75
70
65
60
55
50
45
40
35
30
25
20
15
10
5
0
Pre-Op
1 Year
2 Years
5 Years
Legend

Level of sports activities

This is reflected by the “Tegner” score and can be seen that my patients compare favourably with the national average