

Septic arthritis in ACL reconstruction surgery with hamstring autografts. Eleven years of experience.

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Abstract

BACKGROUND:

Knee joint infection after ACL reconstruction is a rare complication with a low reported incidence, but the consequences can be devastating. The purpose of the study was to determine the incidence of septic arthritis after primary ACL reconstruction with hamstring auto-graft and the risk factors that may be associated.

METHOD:

A retrospective study of all primary ACL reconstruction from January 2000 to May 2011. Electronic medical records were reviewed to determine the number of infections, operating time, associated procedure, time of presentation after surgery, infection treatment, microbiological cultures and graft retention. At the end of the follow-up (18-108months) a functional assessment of all the infected patients was performed using the Lysholm score with the Lysholm score.

RESULTS:

We analyzed 1564 cases of primary ACL reconstruction with hamstring autograft, of which seven cases were diagnosed with postoperative joint infection (incidence rate of 0.45%). The infectious agent most frequently isolated was a coagulase-negative Staphylococcus. Neither intraoperative factors nor age correlated with the development of the infection. The average Lysholm score was 95 points (range 89-100 points). All but two patients retained their reconstructed ACL. The results of the five patients in which the graft was preserved were significantly better than the two patients that had their grafts removed ($p=0.03$).

CONCLUSION:

We conclude that septic arthritis post ACL reconstruction has a low incidence rate, which if handled at an early stage allows the patients a satisfactory return to their previous activities. Graft retention is important to obtain better functional results.

LEVEL OF EVIDENCE:

IV.