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Surgical Techniques

## Posterior Cruciate Ligament Reconstruction, Single Bundle Technique.

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## KEY WORDS

Posterior cruciate ligament Reconstruction

The main author declares that he has a conflict of interest with Johnson y Johnson / STRYKER

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INTRODUCTION

Single-bundle posterior cruciate ligament (PCL) reconstruction is a challenging procedure that requires

a deep understanding of anatomy, biomechanics, and advanced surgical techniques. This video aims

to provide an audiovisual guide, to facilitate the performance of this challenging surgery.

The PCL plays a crucial role in the rotational and anteroposterior stability of the knee. Single-bundle

reconstruction focuses on restoring function of the anterolateral bundle, which is the primary stabilizer

of the PCL. It is recommended to use techniques that reproduce the anatomical orientation and tension

of the anterolateral bundle to prevent posterior translation of the tibia and excessive external rotation.

Double bundle reconstruction techniques show biomechanical superiority, but do not show clinical

benefit, which is why it is our choice.

PATIENT SELECTION

Single-bundle PCL reconstruction is indicated in patients with chronic knee instability due to PCL

injuries unresponsive to conservative treatment, grade III PCL injury, and combined injuries. Individual

patient characteristics, including age, activity level, associated injuries, and ligamentous laxity and

alignment, should be carefully considered to determine the type of correction. Well, in chronic injuries,

alignment takes precedence over ligamentous reconstruction.

IMAGENOLOGY

A thorough preoperative evaluation is recommended with magnetic resonance imaging to assess

associated injuries, stress radiographs, and axis assessment in chronic patients and varus patients.

Perform a thorough physical examination, as associated injuries may be present in more than 70% of

cases.

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2

CLINICAL RESULTS

The available literature has consistently demonstrated significant improvements in a variety of clinical

measures after single-bundle PCL reconstruction. In terms of knee stability, a substantial reduction in

posterior laxity is observed, measured through posterior drawer and tibial translation tests, indicating

effective restoration of PCL function.

In addition to improved stability, patients report a noticeable decrease in pain and significant recovery

of knee function. Objective measurements of function, such as range of motion and muscle strength,

show satisfactory restoration of joint biomechanics, resulting in increased ability to perform daily

activities and sports.

Subjective results are also positive, with patients reporting improved quality of life and greater

satisfaction with the reconstructed knee. Outcome assessment scales, such as the International Knee

Documentation Committee (IKDC) and the Knee Injury and Osteoarthritis Outcome Score (KOOS),

reflect significant improvement in knee function and functional capacity after surgery.

CONCLUSIONS

Single-bundle posterior cruciate ligament reconstruction is an advanced technique that offers promising

results in the hands of expert knee surgeons. With a thorough understanding of the biomechanical

fundamentals, careful patient selection, and precise execution of the surgical technique, this

intervention remains a suitable option for the management of PCL injuries. I hope that with this video,

the surgical technique is made easier and can be done in a reproducible way.

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