Ignore the Patella in Revision Total Knee Surgery

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Introduction: In the setting of the aseptic revision, a common question is: what should be done with the resurfaced patella? We report on a series of aseptic RTKR where one or both components were revised, and the patella was not.

Methods: The study group was 147 consecutive RTKR in 137 patients where the patella was not revised, with average age 71.5 (range 43 to 93) and BMI 31.2 (range 21.5 to 50.8). The group was followed for a minimum of 5 years (range 5 to 9). At the time of final follow up 13 patients (15 knees) had died and 2 patients (2 knees) were lost to follow up leaving 121 patients (130 knees) available for review. Of this group, components revised included: 51 both components, 6 femur only, 3 tibia only, and 70 poly only. In 5 cases there was a mismatch between a retained non-oval patella and new trochlear groove. In 10 cases, patella polyethylene cold flow or wear was identified. Average time from primary to revision (age of the original patellar button) was 8.6 years (range 1 month to 17.9 years).

Results: At final follow-up of a minimum of 5 years (range 5 to 9), there had been no reoperations on any patella, and none were at risk of failure. 6 of the patella had tilt beyond 10 degrees on the sunrise view, but none were subluxed. KSS averaged 86 (range 24-100) at final follow-up.

Conclusions: At midterm follow-up in the group of RTKR where the patella was not revised, we identified no subsequent failures of the patella. This is despite the presence of patella poly-wear and mismatched shapes in several knees. Unless the button is loose, severely worn or maltracking, surgeons can confidently retain the original button in place.