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Vietnam Veterans' Readjustment

Restoration Of Patellofemoral Alignment And Posterior Condylar Offset Following

Robotic Knee Arthroplasty

Journal of the American Statistical Association

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Washington, D.C

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## **DAVILA ELAINA**

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Computerworld CRC Press  
Restoration of Patellofemoral Alignment  
and Posterior Condylar Offset Following  
Robotic Knee Arthroplasty Manoshi  
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Manoshi Bhowmik-Stoker (3A- Stryker),  
Emily L. Hampp (3A- Stryker), Jeffrey S.  
Zarin (3B- Stryker) INTRODUCTION:  
While total knee arthroplasty (TKA) for  
end stage osteoarthritis is an effective  
treatment, a subset of patients continue  
to have pain, stiffness and mechanical  
sensations. While restoring limb  
alignment to be mechanically neutral is  
a common goal for arthroplasty  
surgeons, the patellofemoral articulation

(PFA) and reestablishing the posterior condylar offset (PCO) have been overlooked as significant factors which contribute to the success of this procedure. For the patella to track centrally within the trochlear groove, three-dimensional positioning of the femoral component and precise soft tissue balancing are critical. Restoring the native height, tilt and translation of the patella following TKA provide a direct indication of procedural success. In addition, preservation of PCO has been shown in literature have correlation to improvements in functional outcomes and greater range of motion. Technological innovations such as robotic assisted (RA) TKA allow surgeons to better visualize three-dimensional joint mechanics to provide an optimized

patient specific plan. To date, it has not been determined if this benefit allows surgeons to address patellofemoral tracking and sagittal knee kinematics. Thus, the purpose of this study was to characterize restoration of PCO and PFA in patients following RA TKA. METHODS: This study was a retrospective, radiographic review of 60 cases performed by a single surgeon. All cases received a PS design with an asymmetric patellar button, implanted with a RA TKA technique. Patients had a mean age of 63 (range 36 - 82), mean BMI of 31.3 (range 21.5 u2013 50.4), and included 33 females and 27 males. The majority of cases were treated for osteoarthritis. Four bilateral cases, 28 right knees and 28 left knees were included in this analysis. Radiographs included an AP,

lateral and merchant views taken pre-operatively and at 8-week post-operative follow up. Radiographs were reviewed using a PACS system and linear and angular measurements were completed using an imaging software. As previously reported, PCO ratio (PCOR) was calculated as the quotient of the distance between the posterior condylar border and the tangent to the posterior cortex of the femoral diaphysis, and the distance between the posterior condylar border and the tangent to the anterior cortex of the femoral diaphysis. The delta between pre-operative and post-operative PCOR was determined. To determine patellar alignment, the Knee Society Radiographic Evaluation system was implemented. Patella tilt ( $\theta$ ) was defined as the angle between the

anterior limits of the femoral component condyles and the prosthesisu bone interface line of the patellar component as previously defined. Patella displacement ( $d$ ) is defined as the distance between the lines intersecting the center of the patella and the line through the deepest part of the trochlear groove as previously published (Figure 1). Patellar tilt and displacement was measured from merchant views. Patellar height was determined using the Insall-Salvati ratio from the lateral films. Descriptive statistics and Student t-test were used to determine differences from pre to post op radiographs. Literature based controls were used to reference threshold values. RESULTS SECTION: The PCOR pre-operatively was 0.50 ranging from 0.40 to 0.61. Post-operatively this

value was 0.50 with a range from 0.36 to 0.64. This was an average change of 0.05 from the pre to the post-operative value with a range from 0 to 0.13. No significant difference were noted in change from pre to post-operative PCOR ( $p=0.64$ ). This differed from previous reports on PCOR restoration in literature (Table 1).  $u03b3$  values indicated an average patellar tilt of 1.7 degrees with ranges from 0.1 to 3 degrees.  $u03b4$  values indicated an average patellar displacement of 1.5 mm with a range from 0 to 3 mm. No patella baja (0.8) or alta (1.2) was noted per Insall-Salvati ratio. **DISCUSSION:** Restoring patellofemoral kinematics has been identified as a key factor in patient satisfaction and function following TKA. Accurate joint line restoration and

reconstitution of the PCO have been associated with improved patient outcomes. In this study, we assessed the ability of RA TKA to address three-dimensional joint reconstruction. The robotic system allowed the surgeon to set a desired femoral rotation by defining Whiteside's line and matching the patient's native trochlear groove to that of the femoral implant. In addition, the robotic systems has been shown to preserve soft tissue during haptic guiding cutting allowing the surgeon to control releases of the medial or lateral retinaculum, as needed, for patellar alignment. With new robotic technologies, the ability to visualize cortical component fit allows the surgeon to precisely reproduce the patient's native condylar and

patellofemoral anatomy. Further study of patient kinematics following RA TKA is needed to determine the relationship of component position and patient outcomes. SIGNIFICANCE/CLINICAL RELEVANCE: While TKA is considered a highly successful procedure in reducing pain and improving function in patients with end stage osteoarthritis, 19% of patients continue to report anterior pain and stiffness which may be related to improper alignment and component position following surgery. Finding a solution to improve component position, patellar tracking and patients knee function may improve the number of patients satisfied with their procedure.

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Drug development is an iterative process. The recent publications of regulatory guidelines further entail a lifecycle approach. Blending data from disparate sources, the Bayesian approach provides a flexible framework for drug development. Despite its

advantages, the uptake of Bayesian methodologies is lagging behind in the field of pharmaceutical development. Written specifically for pharmaceutical practitioners, *Bayesian Analysis with R for Drug Development: Concepts, Algorithms, and Case Studies*, describes a wide range of Bayesian applications to problems throughout pre-clinical, clinical, and Chemistry, Manufacturing, and Control (CMC) development. Authored by two seasoned statisticians in the pharmaceutical industry, the book provides detailed Bayesian solutions to a broad array of pharmaceutical problems. Features Provides a single source of information on Bayesian statistics for drug development Covers a wide spectrum of pre-clinical, clinical, and CMC topics Demonstrates proper

Bayesian applications using real-life examples Includes easy-to-follow R code with Bayesian Markov Chain Monte Carlo performed in both JAGS and Stan Bayesian software platforms Offers sufficient background for each problem and detailed description of solutions suitable for practitioners with limited Bayesian knowledge Harry Yang, Ph.D., is Senior Director and Head of Statistical Sciences at AstraZeneca. He has 24 years of experience across all aspects of drug research and development and extensive global regulatory experiences. He has published 6 statistical books, 15 book chapters, and over 90 peer-reviewed papers on diverse scientific and statistical subjects, including 15 joint statistical works with Dr. Novick. He is a frequent invited speaker at national

and international conferences. He also developed statistical courses and conducted training at the FDA and USP as well as Peking University. Steven Novick, Ph.D., is Director of Statistical Sciences at AstraZeneca. He has extensively contributed statistical methods to the biopharmaceutical literature. Novick is a skilled Bayesian computer programmer and is frequently invited to speak at conferences, having developed and taught courses in several areas, including drug-combination analysis and Bayesian methods in clinical areas. Novick served on IPAC-RS and has chaired several national statistical conferences.

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Petitions and briefs filed with the U.S. Supreme Court.

### **Vietnam Veterans' Readjustment**

Prentice Hall

Vols. for 1963- include as pt. 2 of the Jan. issue: Medical subject headings.

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*Criminal Law Series*

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