CLINICAL MEET

DEPARTMENT OF ORTHOPAEDICS

Robotic Total Knee Arthroplasty In Bilateral Severe Valgus Knee

Dr Ketan Kulkarni Resident Department of Orthopedics 71 year old female came with complaints of pain and deformity over bilateral knee since 5 years.

On Examination

No fixed flexion deformity

Bilateral genu valgum present

Hyperextension of 10 degrees

Flexion of 80 degrees on left side and 100 degrees on right side

X-Ray is suggestive of:

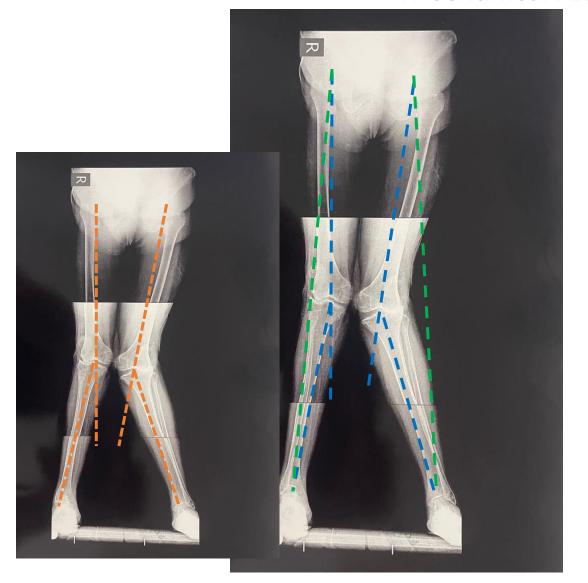
- 1. Bilateral genu valgum
- 2. Kellgren lawrence classification type IV
- 3. Lateral compartment has obliteration of joint space
- 4. Subchondral sclerosis
- 5. Osteophyte formation
- 6. Medial side opening



Q Angle is 26.3 degrees on left side and 18.6 degrees on right side

Intermalleolar distance was 18 cm (normal is <6cm)

Anatomical Axis Mechanical Axis



Gait shows a bilateral valgus thrust gait







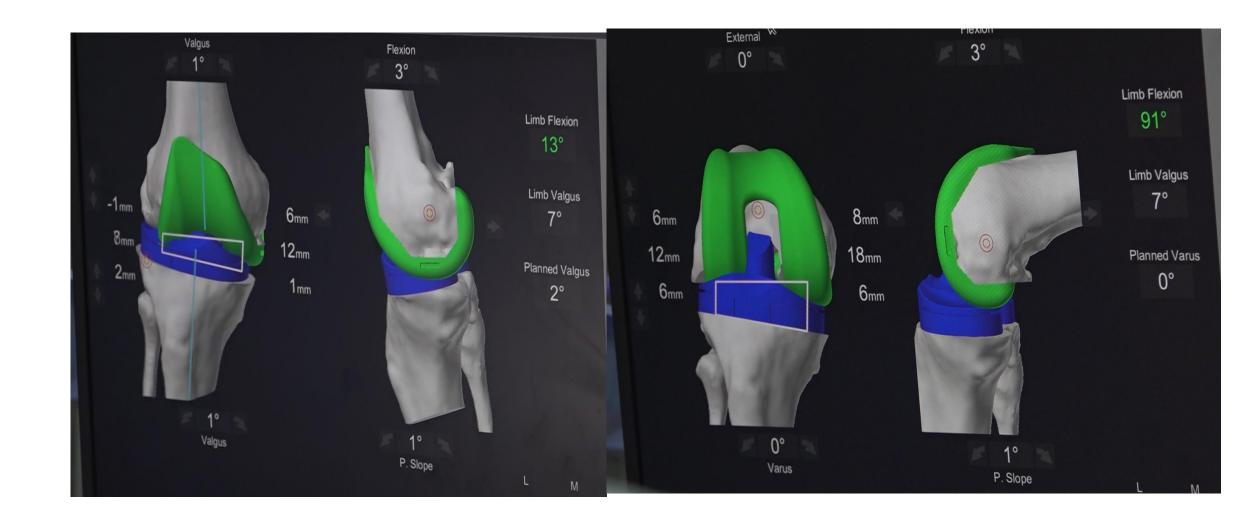
Left



Right

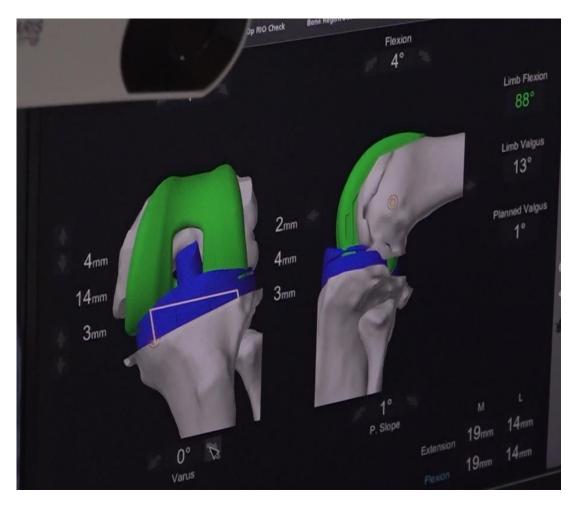


Pre-operative planning of right side

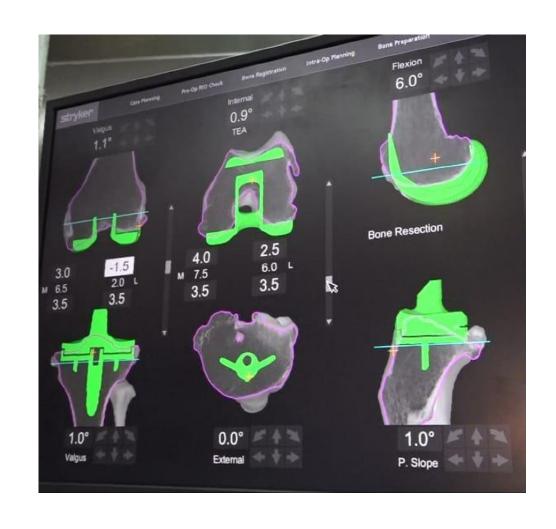


Pre-operative planning of left side





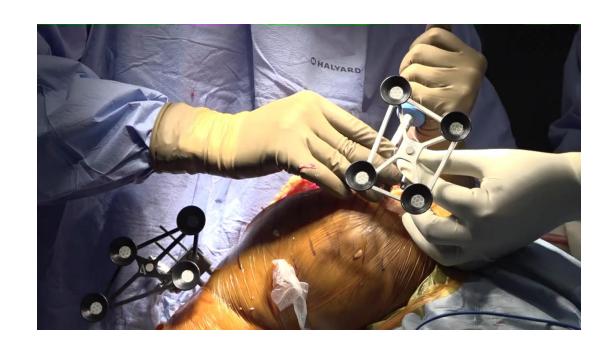
Depicts The Deformities And Imbalanced Knee

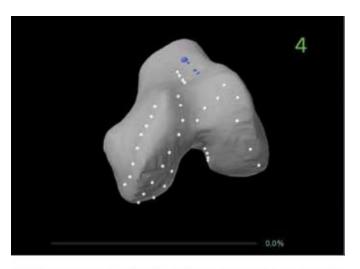


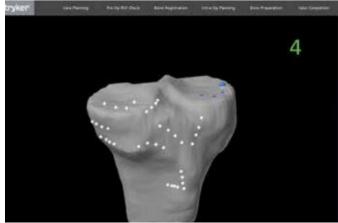
Insertion of Navigation Array



Registration







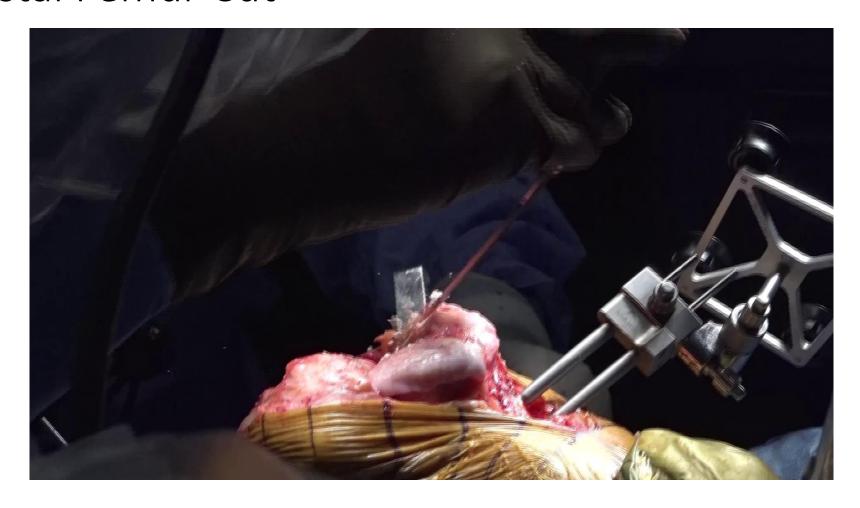
Validation of Robotic Arm Done



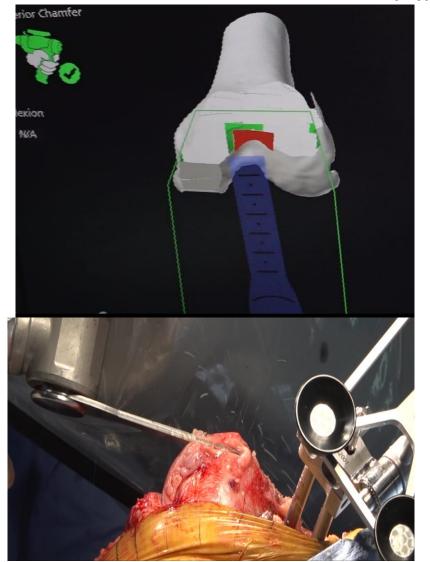
Finalised Femoral And Tibial Cuts

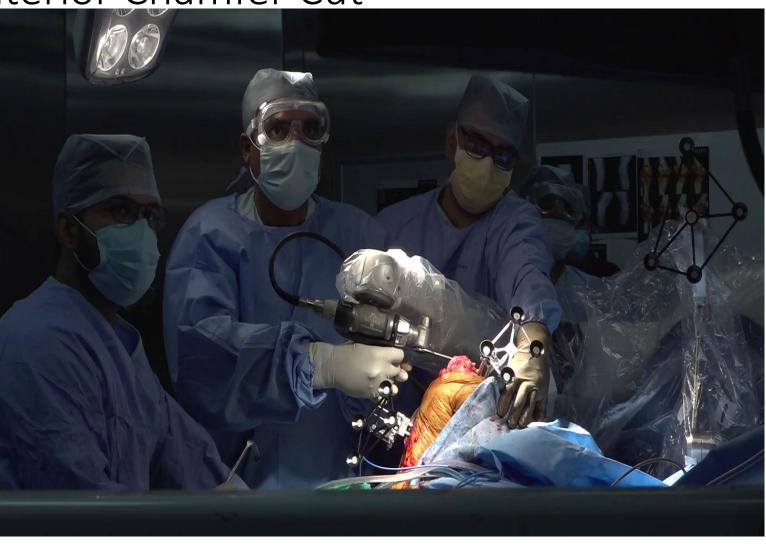


Distal Femur Cut



Anterior Chamfer Cut

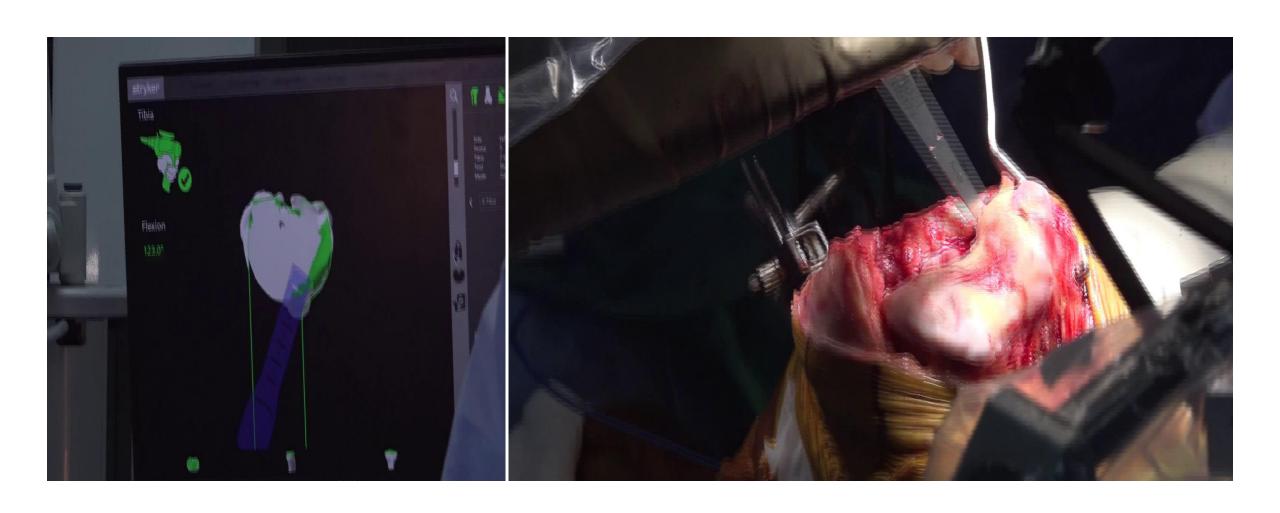




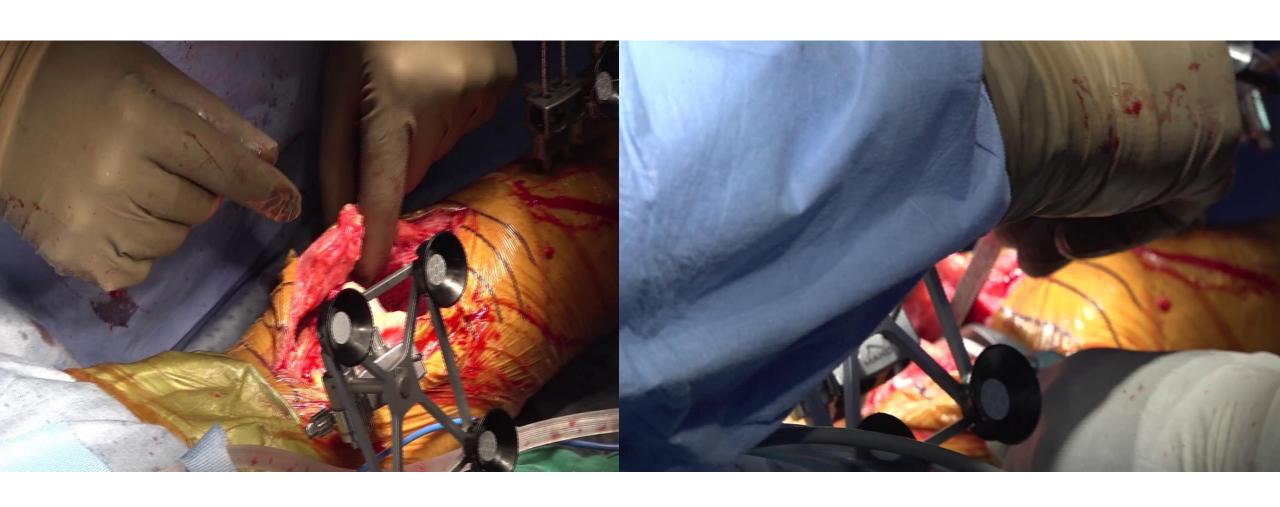
Posterior Chamfer Cut



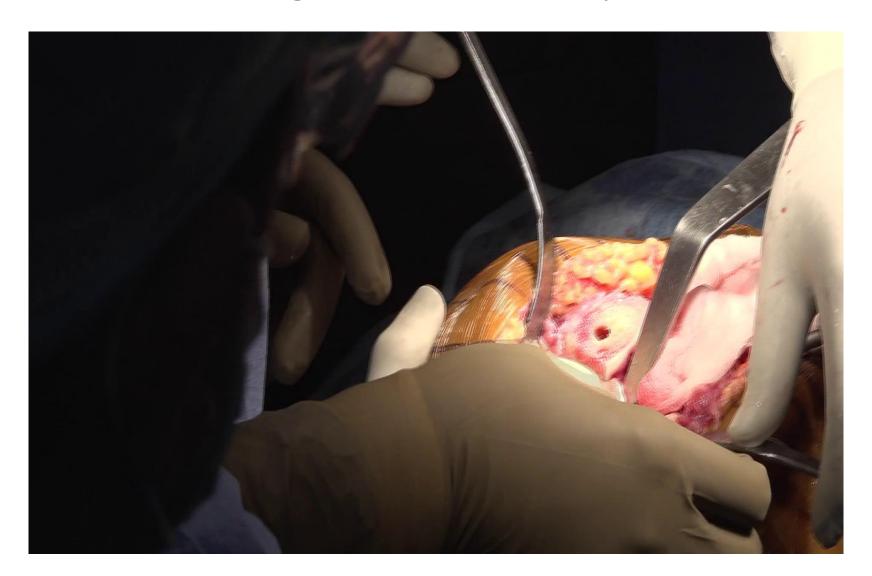
Tibial Cut



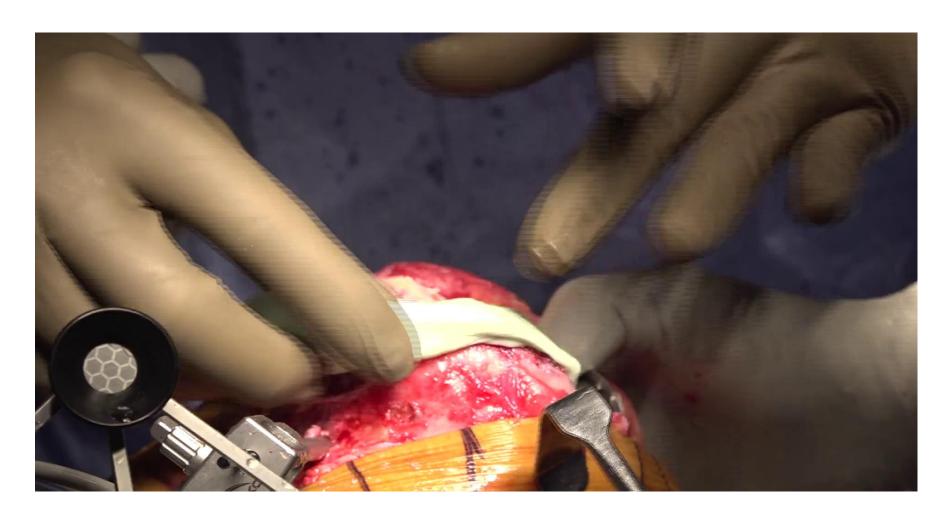
Soft Tissue Balancing By Pie Crusting



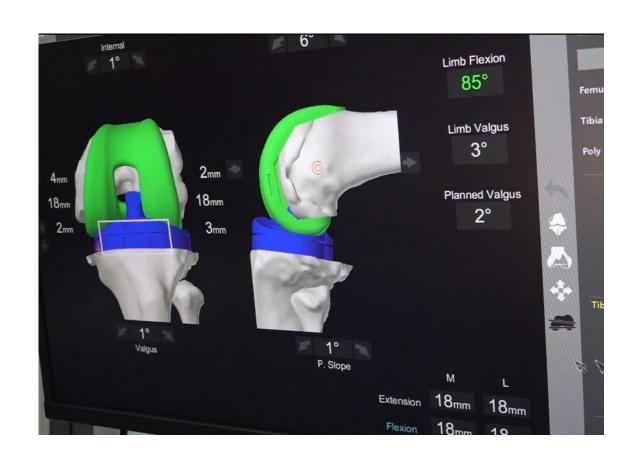
Cementing And Tibia Tray Insertion

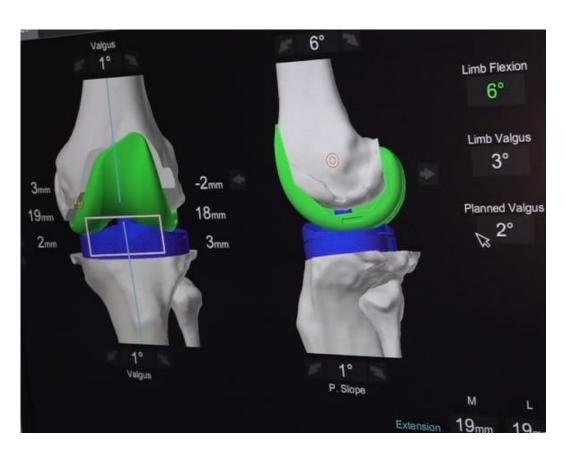


Femoral Component Insertion

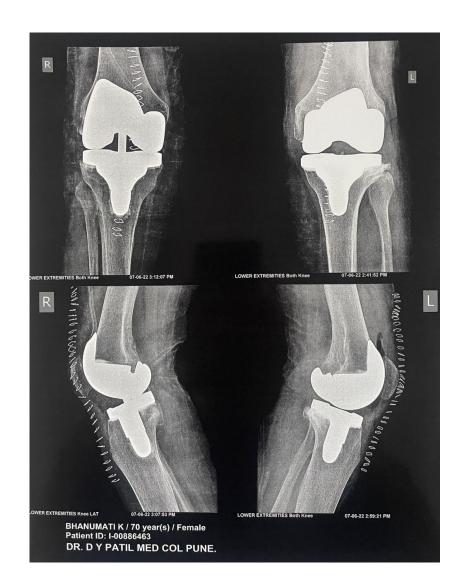


Post Implantation Confirmation of Flexion And Extension Gap









3 months post-op



Knee ROM







Walking video

Advantages of Robotic TKR

- It is a CT based patient specific preoperative planning for accurate cuts and well placement of implants
- Uses bone balancing
- A precise cut, well alligned, balanced knee
- Less complications, less pain and early return to function

Thank You