Evidence in focus

Publication summary

Voloshin I, et al. *Am J Sports Med* (2007)*

smith&nephew

Supporting healthcare professionals for over 150 years

COBLATION◇ chondroplasty is an effective method to treat partial thickness cartilage lesions

On second-look knee arthroscopy, 88% of previously treated partial-thickness cartilage lesions showed no signs of progression

Study design

- Out of 193 consecutive patients receiving COBLATION treatment from a single surgeon for partial-thickness cartilage defects in the knee, 15 (25 lesions) required repeat arthroscopy for recurrent or new injuries
- Lesion location, size, grade and stability were compared after an average of 10.4 months between procedures

Key results

- Mean lesion size decreased from initial procedure to second-look arthroscopy in all lesions (n = 25; Figure 1a) and tibiofemoral joint lesions (n = 14; Figure 1b)
  - No tibiofemoral lesions showed any signs of progression
- The majority of lesions (88%) showed no signs of progressing at second-look arthroscopy, and 56% improved with complete or partial filling

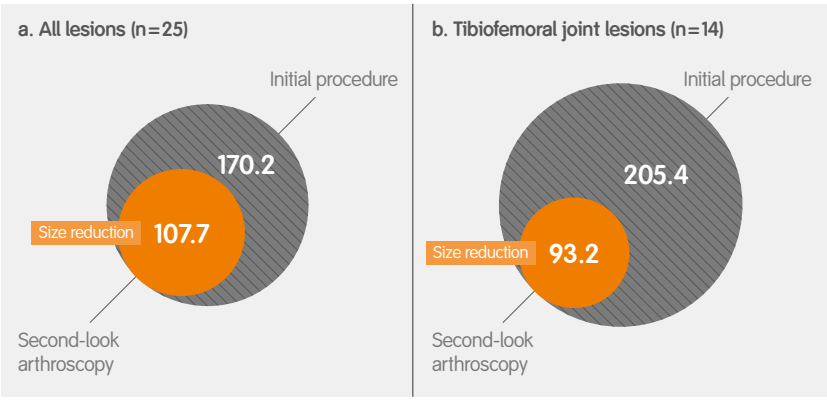

Figure 1. Mean lesion size (mm^2)

Conclusion

Only three of the 25 lesions (12%) in this study demonstrated further deterioration of the cartilage defects after COBLATION treatment. Additionally, partial or complete filling was observed in 56% of the treated lesions.

Considerations

- No marrow stimulating procedures were performed during initial chondroplasty
- Only symptomatic patients warranting repeat arthroscopy were included in this study

Study citation

*Voloshin I, Morse KR, Allred CD, Bissell SA, Maloney MD, DeHaven KE. Arthroscopic evaluation of radiofrequency chondroplasty of the knee. *Am J Sports Med.* 2007;35:1702-1707.

www.smith-nephew.com