
Repair of Medial Meniscus Ramp Lesion Improves Knee Stability in Primary Anterior Cruciate Ligament Reconstruction

Quantitative Assessment Using
an Electromagnetic Measurement System

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Ramp lesion & knee instability

ACL-injury + ramp lesion

Pivot-shift grade & Lachman test

▶ ACL injury < ACL injury + ramp lesion

DePhillipo NN et al. OJSM 2020

▶ ACL injury = ACL injury + ramp lesion

Albayrak K et al. KSSTA 2021

No consensus

ACLR + ramp repair

Pivot-shift test grade

◆ ACLR = ACLR + ramp repair

DePhillipo NN et al. OJSM 2020

◆ **Improved** anterior knee laxity

Tashiro Y et al. KSSTA 2020

No quantitative evaluation

*ACLR: ACL reconstruction

Purpose

To investigate the influence of ramp lesion on clinical outcomes focusing on **pre- and post-operative knee laxity** in primary ACL reconstruction

Hypotheses

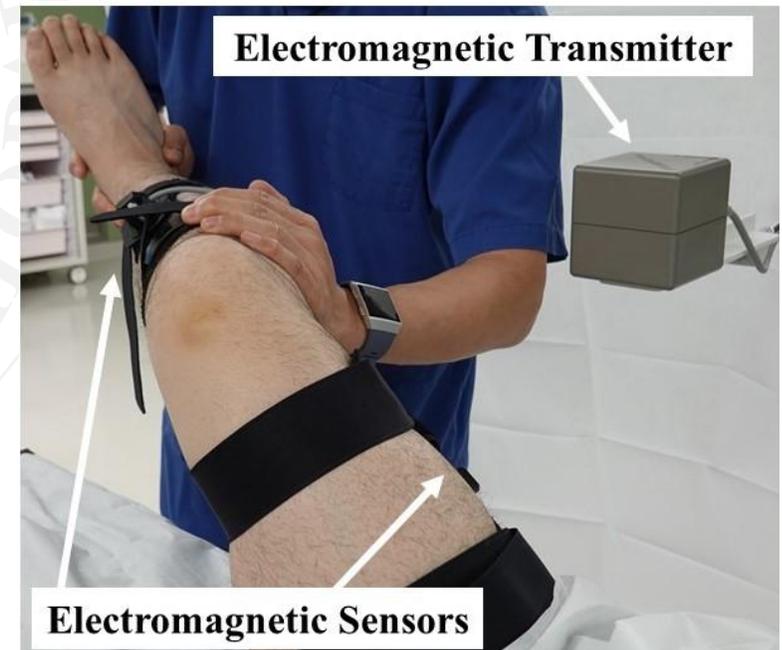
- **Preoperative knee laxity** would be **greater** in patients with ramp lesion than those without
- **Postoperative knee laxity** would be **improved by ramp lesion repair**

Methods



Patients

- ✓ Retrospective analysis of prospectively collected data between 2014-2023
- ✓ **127** patients who underwent primary ACLR
 - Follow-up > 1 year
 - 2nd look arthroscopy at 1Y post-op
 - Knee laxity measurement by an electromagnetic measurement system (**EMS**) under general anesthesia



Hoshino Y et al. AJSM 2007
Nagai K et al. KSSTA 2015

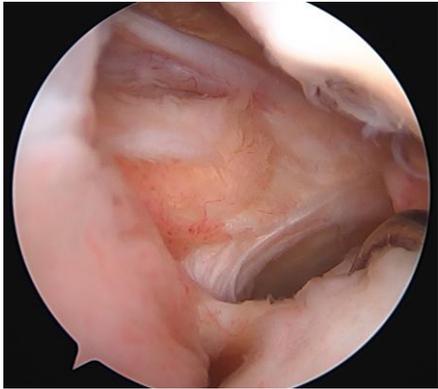
Patient allocation

Primary ACLR patients (n=127)

Arthroscopy

Ramp lesion (+)

Ramp lesion (-)



✓LM tear(n=7) included

n=106

Exclusion:

Other MM tear(n=19)
LM tear(n=37)
MM &LM tear(n=5)
Multi-ligament injury(n=1)

Ramp group

n=21

➔ Meniscal Repair

Control group

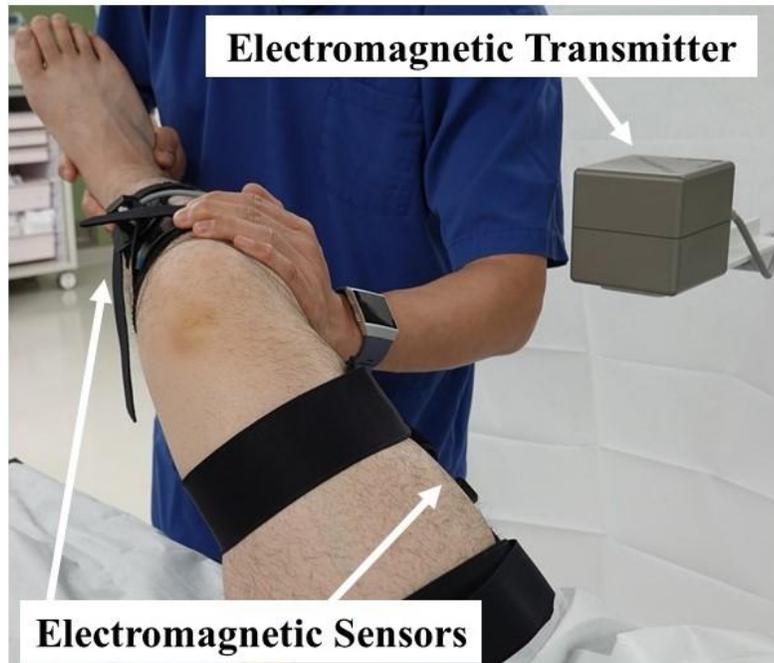
n=44

No meniscal tears

Quantitative assessment using EMS

- Non-invasive
- Precise ($<1\text{mm}$, $<2^\circ$)
- Femoral and tibial coordinate system configured by digitizing 7 bony landmarks

Hoshino Y, et al. AJSM 2007
Araki D, et al. Arthroscopy 2011
Nagai K, et al. KSSTA 2015



Evaluation & Analysis

➤ **Knee laxity** (pre- & post-op)

✓ EMS **Lachman test: SSD in ATT** (mm)

Pivot-shift test: Posterior tibial acceleration (m/s²)

Hoshino Y et al. AJSM 2007, Araki D et al. Arthroscopy 2011

Nagai K et al. KSSTA 2015

✓ **KT-2000: SSD in ATT** (mm)

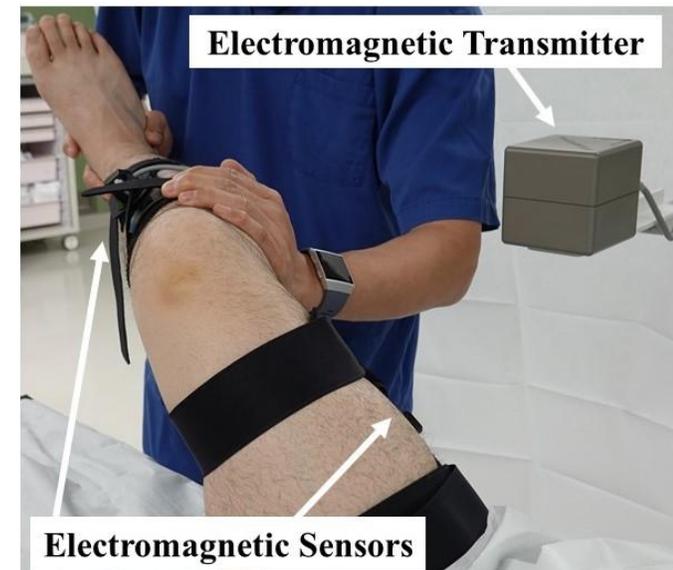
➤ **IKDC-subjective knee form (SKF)**

Statistical analysis

✓ **Unpaired t-test**
($P < 0.05$)

Ramp vs **Control**

SSD, side-to-side difference
ATT, anterior tibial translation



Results



Patients demographics

	Ramp (n=21)	Control (n=44)	P value
Sex(M/F)	10 / 11	23 / 21	0.82
Age(years)	24 ± 8	26 ± 13	0.35
Tegner activity scale	7.4 ± 1.4	6.6 ± 1.9	0.14
Period from injury to surgery (days)	153 ± 219	138 ± 270	0.92
Graft type	HT : 21	HT: 44	Mean ± SD

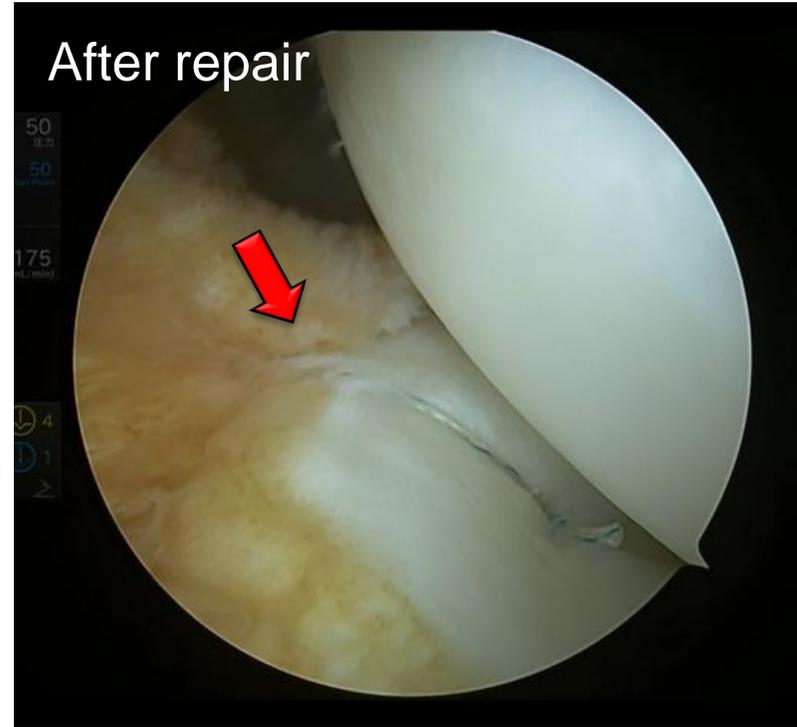
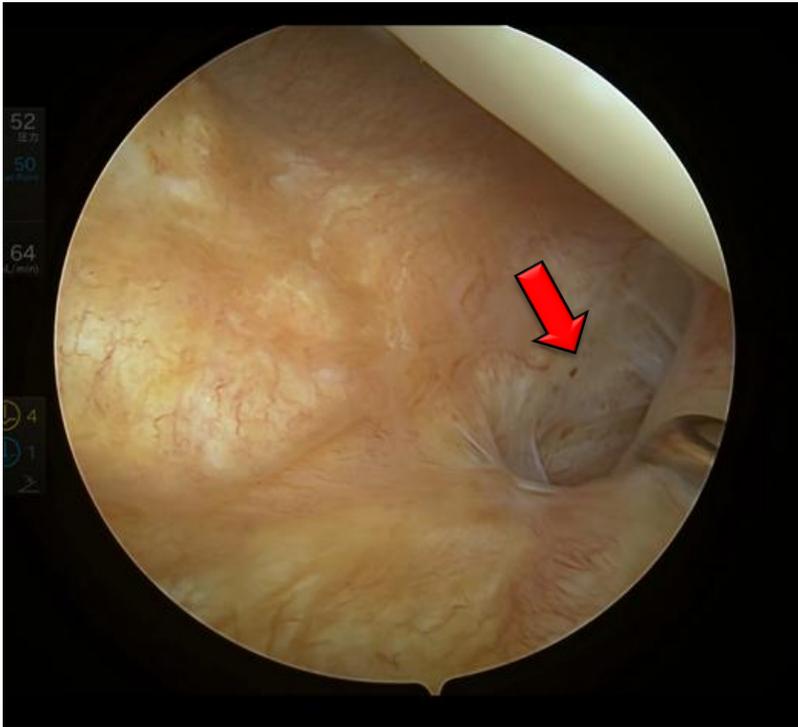
Patients demographics

Ramp
(n=21)

Control
(n=11)

P value

Right knee



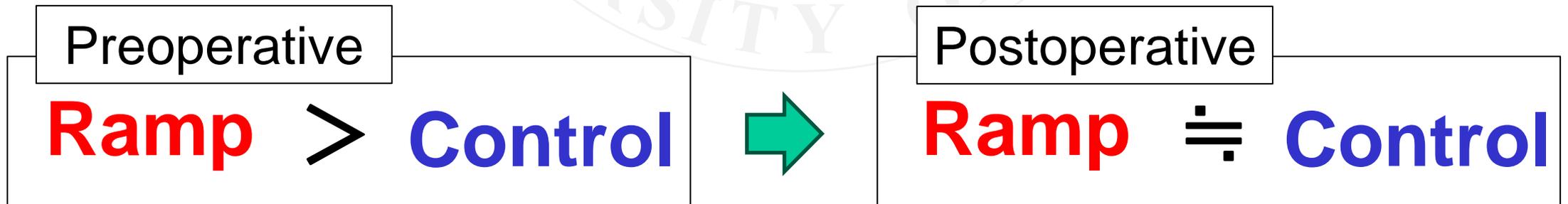
All ramp lesions were arthroscopically confirmed **healed**

KT-2000/Lachman test

		Ramp	Control	P value
KT-2000 SSD (mm)	Pre-op	5.9±2.5	4.8±2.2	0.08
	Post-op	0.4±1.5	1.0±1.3	0.11
Lachman test SSD in ATT (mm)	Pre-op	6.3±3.7	4.0±4.5	0.04
	Post-op	0.8±3.9	1.4±4.1	0.57

Mean±SD

➤ Lachman test SSD in ATT

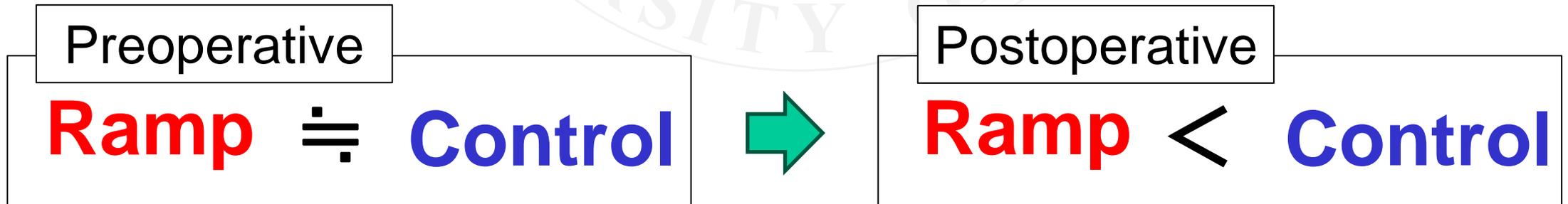


Pivot shift test / IKDC-SKF

		Ramp	Control	P value
Pivot-shift test posterior tibial acceleration(m/s ²)	Pre-op	1.6±0.9	1.7±0.7	0.74
	Post-op	1.0±0.5	1.3±0.6	0.03
IKDC-SKF	Pre-op	56±15	61±13	0.23
	Post-op	83±10	87±13	0.30

Mean±SD

➤ Pivot-shift test: tibial acceleration





Discussion



Instability in ACL-injured + ramp lesion knees

Previous studies

Ramp lesion was related to

- **Greater** KT-2000 SSD
Tashiro Y et al. KSSTA 2020
- **High-grade** pivot-shift
Musahl V et al. AJSM 2016
Mouton C et al. KSSTA 2020
Fukushima H et al. Arthroscopy 2024



No significant differences in

- ATT on stress X-ray
Hatayama et al. OJSM 2020
- Lachman & pivot-shift tests
Albayrak K et al. KSSTA 2021

Present study

- **Increased anterior instability** in the ramp group
- **No significant difference** in the pivot shift test

Instability in ACLR + ramp lesion knees

Previous studies

Ramp repair

Pivot-shift grade

- ACLR = ACLR + ramp repair

DePhillipo NN et al. OJSM 2020

- **Improved** anterior knee laxity

Tashiro Y et al. KSSTA 2020

Ramp non-repair

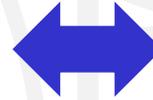
Lachman & pivot-shift test

- Repair = Non-repair

Albayrak K et al. KSSTA 2021

- Repair = Trephination

Xin Liu et al. AJSM 2017



Present study

- All cases underwent **repair** and confirmed **healing**
- Stability was **quantitatively comparable** to the control group

Strengths and Limitations

Strengths

- ✓ **Arthroscopically** confirmed ramp lesions
- ✓ Pre- and post-operative 1-year **EUA performed**
- ✓ **Quantitative evaluation** of Lachman and pivot shift test using **EMS**

Limitations

- ✓ Small sample size
- ✓ No groups of ramp lesions without repair for comparison
- ✓ Lateral meniscus injury included in the ramp group

Conclusion

- ✓ **Preoperatively**, the ramp group **showed increased anterior knee instability** compared to the control group
- ✓ **Postoperative** knee stability was **comparable** between the two groups
- ✓ The findings suggest that **ramp lesion repair** may **improve knee stability** in ACL reconstruction, and **ramp lesion repair may be recommended**

A large, three-dimensional sign spelling out the word "BEIKOBE" in white, illuminated letters. The letters are arranged in a row on a dark, textured surface. The letters are lit from within, with a blue glow for most and a yellowish-orange glow for the 'O' and 'B'. The background is a dark night sky with a building facade covered in numerous small, glowing lights. A body of water is visible in the middle ground, and a colorful firework or light display is visible on the right side.

BEIKOBE

Thank you so much for your attention