

# Hubungan antara Total Knee Replacement Non-Resurfacing Patella dengan terjadinya Anterior Knee Pain di RS Cipto Mangunkusumo = The Correlation between Total Knee Replacement Non-Resurfacing Patella with Anterior Knee Pain in Cipto Mangunkusumo Hospital

Sammy Saleh Alhuraiby, author

Deskripsi Lengkap: <https://lib.ui.ac.id/detail?id=20508936&lokasi=lokal>

---

## Abstrak

Latar belakang: Anterior knee pain (AKP) merupakan penyebab utama terjadinya permasalahan yang persisten paska dilakukannya TKR. Saat ini di Indonesia belum terdapat data mengenai luaran ini untuk mengevaluasi paska dilakukannya operasi TKR, oleh karenanya kami merasa perlu untuk dilakukannya penelitian ini.

Metode: Penelitian ini merupakan penelitian kohort retrospektif. Subjek adalah pasien yang menjalani operasi TKR di RS Cipto Mangunkusumo sejak Januari 2011 sampai Januari 2019. Pada penelitian ini, didapatkan total 69 lutut dimana 39 lutut dilakukan tindakan non-resurfacing sementara 30 lutut dilakukan resurfacing.

Pasien dengan revisi TKR, riwayat infeksi sendi lutut atau tumor, implant loosening, riwayat operasi pada sendi lutut sebelumnya di eksklusi dari penelitian ini.

Hasil: Pada kelompok non-resurfacing terdapat 32 lutut perempuan (82,1%) dan 7 lutut laki-laki (17,9%), sementara kelompok resurfacing terdapat 22 lutut perempuan (73,3%) dan 8 lutut laki-laki (26,7%). Baik pada kelompok nonresurfacing dan resurfacing, terdapat peningkatan skor paska operatif joint motion ( $p < 0,001$ ) dan expectation ( $p = 0,046$ ) dengan pengukuran KSS, namun nilai satisfaction dibandingkan preoperative dan paska operatif pada kedua kelompok menunjukkan perbedaan yang tidak bermakna ( $p = 0,314$ ) dibandingkan dengan sebelum dilakukannya operasi. Pada penilaian dengan kuesioner Kujala, ditemukan perbedaan bermakna skor total (47 [42-58] vs 55 [45-63];  $p < 0,001$ ), limp (3 [3-5] vs 5 [2-5];  $p < 0,001$ ), support (3 [3-5] vs 5 [3-5];  $p < 0,001$ ), walking (2 [2-3] vs 2 [2-5];  $p < 0,035$ ), running (0 [0-6] vs 3 [0-8];  $p < 0,001$ ), jumping (0 [0-0] vs 3 [0-8];  $p = 0,010$ ), dan flexion deficiency (3 [0-3] vs 3 [0-5];  $p = 0,021$ ).

Kesimpulan: Kami menemukan bahwa TKR non-resurfacing berhubungan dengan kejadian AKP. Namun tidak terdapat perbedaan skala nyeri diantara kelompok resurfacing dan non-resurfacing patella. Selain itu, terdapat perbedaan signifikan skor Kujala dan KSS pada kedua kelompok.

.....Background: Anterior knee pain (AKP) is a main problem that commonly occurs after total knee replacement (TKR). In Indonesia, there are no data regarding this outcome.

Methods: This study aims to evaluate AKP after TKR. This was a retrospective study. Subjects were patients who underwent TKR from January 2011 to January 2019.

Results: There were 69 knees in this study, in which 39 subjects were nonresurfaced. Those with revision TKR, history of infected knee joint or tumor, implant loosening, history of infected knee joint, were excluded from this study. In the non-resurfaced group, there were 32 (82.1%) women's knees and 7 (17.9%) men's knees. Whereas, in the resurfaced group, there were 22 (73.3%) women's knees, and 8 (26.7%) men's knees. In both the non-resurfaced and resurfacing groups, there was an increase in joint motion scores ( $p < 0.001$ ) and expectation ( $p = 0.046$ ) by measuring KSS but satisfaction scores compared to preoperative and postoperative in both groups showed no significant differences ( $p = 0.314$ ) compared to before surgery. In the assessment using the Kujala questionnaire, differences in total score (47 [42-58] vs 55 [45-63];  $p < 0.001$ ), limping (3 [3-5] vs 5 [2-5];  $p < 0.001$ ), support (3 [3-5] vs 5 [3-5];  $p < 0.001$ ), walking (2 [2-3] vs 2 [2-5];  $p < 0.035$ ), running (0 [0- ] 6] vs 3 [0-8];  $p < 0.001$ ), jump (0 [0-0] vs 3 [0-8];  $p = 0.010$ ), and flexion deficiency (3 [0-3] vs 3 [ 0 -5];  $p = 0.021$ ).

Conclusion: We found that non-resurfacing patellar TKR was associated with AKP. But there was no difference in pain scale between the resurfacing and nonresurfacing patella groups. Moreover, there were significant differences of both Kujala Score and Knee Society Score in both groups.