
Abstract: Prospective studies were done to determine the outcome of allografts and autografts used for revision anterior cruciate ligament reconstruction. The allograft group was comprised of 65 patients observed for a mean of 42 months postoperatively; the autograft (bone-patellar ligament-bone) group contained 20 patients observed for a mean of 27 months postoperatively. KT-2000 testing and a comprehensive knee examination were done on all the patients. The Cincinnati Knee Rating System was used for assessment. Significant improvements were noted in all patients for symptoms, functional limitations, anteroposterior displacements, pivot shift tests, and overall rating scores. KT-2000 results showed 53% of the allograft group and 67% of the autograft group had less than 3 mm increased displacement (not statistically significant). The overall failure rates were 33% for the allografts and 27% for the autografts. Preoperative planning and technical aspects of anterior cruciate ligament revision procedures are described. The authors prefer bone-patellar ligament-bone autografts for anterior cruciate ligament revision, although the data presented were considered preliminary. Bone-patellar ligament-bone allografts may be used when autogenous tissues are not available, because they offer reasonable success rates for patients who are symptomatic with daily activities.