Treatment of talar osteochondral lesions using local osteochondral graft


Abstract: Twelve patients with an osteochondral lesion of the talus were treated with excision of the lesions and local osteochondral autogenous grafting. The lesion was accessed through a replaceable bone block removed from the anterior tibial plafond. The graft was harvested from the medial or lateral talar articular facet on the same side of the lesion. The average age of the patients was 41 years and duration of symptoms was 90 months (ave.). There were six males and six females with the right talus involved in eight and the left in four patients. Graft sizes ranged from four to eight millimeters in diameter. There was a significant improvement in the AOFAS score from 64.4 (ave.) pre-operatively to 90.8 (ave.) postoperatively (p<0.0001), at a follow-up of 25.3 months (ave.). The AOFAS score was slightly higher in patients under 40 years of age and in those without pre-existing joint arthritis. All patients were very satisfied with the procedure. Arthroscopy performed in two patients at six and 12 months following surgery showed good graft incorporation. No complications occurred at the donor site or the site of bone block removal on the distal tibia. The results show that stage III and IV talar osteochondral lesions can be accessed successfully excising a tibial bone block and using local autogenous osteochondral graft harvested from the ipsilateral talar articular facet.