

# INPLASY

## CLINICAL/FUNCTIONAL RESULTS AND COMPLICATION RATE AFTER ISOLATED OR COMBINED ACL RECONSTRUCTION WITH ANTEROLATERAL LIGAMENT: A SYSTEMATIC REVIEW

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### ADMINISTRATIVE INFORMATION

**Support** - Own financing.

**Review Stage at time of this submission** - Formal screening of search results against eligibility criteria.

**Conflicts of interest** - None declared.

**INPLASY registration number:** INPLASY202490107

**Amendments** - This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 24 September 2024 and was last updated on 24 September 2024.

## INTRODUCTION

**Review question / Objective** Due to the role of the anterolateral complex in knee rotational stability, it has recently gained significant attention in the sports community, demonstrating positive results in decreasing the graft failure rate in ACL reconstruction (23-25). However, there is no gold standard guideline and the findings are controversial in relation to traditional reconstruction. Therefore, what is the level of evidence available for recommending the ALL in ACLR?

**Condition being studied** Studies on anterior cruciate ligament reconstruction treated with anterolateral ligament will be included.

## METHODS

**Participant or population** Patients with anterior cruciate ligament rupture.

**Intervention** ACL reconstruction with ALL.

**Comparator** Isolated ACL reconstruction.

**Study designs to be included** Randomized Clinical Trial, Meta-Analysis; Systematic Reviews; Coorte.

**Eligibility criteria** The identified studies underwent a rigorous selection based on the following inclusion criteria:

- Direct relevance to the topic of interest;
- Publication in indexed scientific journals;
- Study design according to selection filter;
- Conducting research on human beings;
- Availability of the full text of the article.

**Information sources** PubMed, EBSCOHost, Scopus, ScienceDirect e WileyOnline.

**Main outcome(s)** Identification of studies According to the search strategy, 359 studies were found with the aforementioned descriptors, which

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were again evaluated according to their design and relevance according to the study type filters and inclusion criteria. There was a very strong correlation between the searches of the two researchers ( $k=0.871$ ). In the end, 24 studies remained; after individual reading and in accordance with the theme, 20 studies were included.

#### **Quality assessment / Risk of bias analysis**

Assessment on the PEDro scale for RCTs, and described as having high potential risk of bias on the ROBIS scale for meta-analyses/systematic reviews and ROBINS for non-randomized studies.

**Strategy of data synthesis** The data will be evaluated in tables, graphs and metric scales described in the bias assessment, according to the PRISMA method.

**Subgroup analysis** There is no subgroup analysis.

**Sensitivity analysis** Data will not be used for meta-analysis.

**Language restriction** There will be no language restriction.

**Country(ies) involved** Brazil.

**Keywords** Reconstruction; Anterior cruciate ligament; Anterolateral ligament; Clinical results; Complications.

#### **Contributions of each author**

Author 1 - Breno Costa Aguiar Rodrigues - study planning, writing, data analysis.

Author 2 - Daniel Lucas Santos Souza - study planning, writing.

Author 3 - Amanda Nogueira Guedes - study planning, writing, data analysis.

Author 4 - Nelio de Azevedo Santos Filho - study planning, writing, data analysis.