

PARTIALLY EXCLUDED POLICY – PE118 PATELLA RESURFACING AS PART OF PRIMARY TOTAL KNEE REPLACEMENT

Policy author:	West Suffolk Clinical Commissioning Group supported by Public Health Suffolk, Suffolk County Council
Policy start date:	January 2015
Subsequent review dates:	April 2017
Next review date:	April 2020

1. Policy Summary

- 1.1 Patella resurfacing during total knee replacements is considered a low priority procedure and will not normally be funded.

2. Background to the Procedure

- 2.1 Patella resurfacing is performed during a total knee replacement and involves resecting the posterior aspect of the patella until it is flat and attaching an implant otherwise known as a “patella button” to the newly resected area¹. The procedure was established as a means to prevent post-operative anterior knee pain, a common complication of early knee replacements attributed to the patello-femoral joint (tricompartamental osteoarthritis), which could require further operative management^{2,3}. Since its introduction, the role of patella resurfacing has been controversial due to mixed evidence and perspective on the benefits and risks^{3,4}.

3. Rationale Behind Policy Decision

- 3.1 Research to evaluate the role of patella resurfacing continues to be conducted, published and reviewed. Some literature demonstrates a modest reduction in re-operation rates in resurfaced groups however this could be explained by the lack of remaining surgical options in a patient who had resurfacing at the time of their TKR. Various papers reported improved symptom control, function or satisfaction in resurfaced groups but this was very variable between studies. The variety of different assessment scores used to quantify these outcomes contributes to this variety and also makes comparison difficult. The most recent meta-analysis reported no significant difference for any of these scores between resurfaced and non-resurfaced patients. While some studies report an absolute difference in rates of anterior knee pain, this was not a significant difference. Possible complications from patella resurfacing are acknowledged but were rarely reported in the studies.

4. Policy Procedure Guidance to CCG

- 4.1 Due to limited evidence, the CCG do not believe that patella resurfacing offers value for money and therefore will not routinely commission this procedure.
- 4.2 Please refer to the evidence brief for the detailed rationale behind the policy.

5. References

1. Swan, J. D., Stoney, J. D., Lim, K., Dowsey, M. M., & Choong, P. F. The need for patella resurfacing in total knee arthroplasty: a literature review. *ANZ journal of surgery*. 2010; 80(4): 223-233.
2. Hsu RW. The management of the patella in total knee arthroplasty. *Chang Gung Med J*. 2006 Sep-Oct;29(5):448-57.
3. Shuzhen L, Yueping C, Wei S, Jinmin Z, Shunqing H, and Xiangping L. Systematic review of patella resurfacing in total knee arthroplasty. *Int Orthop*. 2011 Mar; 35(3): 305–316.
4. Sandiford NA, Alao U, Salamut W, Weitzel S, Skinner JA. Patella Resurfacing during Total Knee Arthroplasty: Have We Got the Issue Covered? *Clin Orthop Surg*. 2014 Dec; 6(4): 373–378