Orthopaedic Connection

Pity the Poor PCL

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Transforming patient information into patient understanding.

How would you like it if your brother was very famous and nobody even knew who you were? His name was frequently heard on TV and written about in the paper in connection with various athletes.

The famous brother is Mr. ACL, which stands for of course, Anterior Cruciate Ligament. Even if your anatomy knowledge is a little fuzzy you still have heard of the ACL.

When you say PCL people think you have made a mistake and meant to say ACL. I feel sorry for the PCL. I really do. It gets no respect and few people have even heard of it.

What It Is

The Posterior Cruciate Ligament is located in the back of the knee and works closely with the Anterior Cruciate Ligament in the front to connect the thigh bone (femur) the lower leg bone (tibia).

The PCL prevents the tibia from moving too far backwards. It is considered the strongest knee ligament. It doesn’t tear as easily as the ACL.

Mechanism

If the knee is hit with sufficient force and the lower leg is driven backward when the knee is bent, you tear your PCL. The ligament is also torn when a driver or passenger’s bent knee strikes the dashboard and the lower leg is driven backward. Someone slipping on ice and landing on the knee can cause the PCL to rupture too.

Isolated Or Complex

PCL injuries are called isolated if the injury doesn’t involve any other structure in the knee. The PCL like the ACL can be partially or completely torn.

Complex injuries involve other ligaments, cartilage, bones, nerves or blood vessels.

The whole knee (not just the patella) can dislocate if enough structures are damaged with the PCL. This is a horrible injury and requires immediate Orthopaedic Surgery evaluation and treatment, a true Orthopaedic emergency. A patient could lose their leg if there is a delay in treatment.

Signs and Symptoms

In the case of an isolated tear of the PCL symptoms may be minimal. There may be some slight swelling and pain in the back of the knee. It’s the opposite of a torn ACL in which the knee becomes very swollen and tense within hours.
Some pain is present in moving the knee and you probably will limp. The knee may or may not feel unsteady.

When To Be Seen
I advise having the knee checked out sooner. No reason to delay if there has been an injury. Exam often gives the diagnosis. Even so, plain x-rays are needed. An MRI is often obtained to confirm the diagnosis. When injured the PCL can fracture off a piece of bone where it attaches to the tibia.

Treatment
- Crutches with partial weight bearing
- First day or two, elevation and ice
- Ibuprofen for pain and inflammation
- A wrap around knee immobilizer to stabilize the knee
- For complete tears and associated injuries surgery may be required
- Tendon grafts are frequently required
- After surgery, crutches, bracing
- It can take several months to fully recover
- A physical therapy program to rehab the entire lower extremity will be required

As you can see from the above points, PCL injuries (although far less common than ACL) require their own good time to fully recover.

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Our goal is simple – To help people return to more pain free, functional lives. I specialize in you.
Good health. Good life. All the best to you.
Be well.
Dr. Haverbush