

Histological characteristics and ultrastructure of polyethylene terephthalate LARS ligament following the reconstruction of anterior cruciate ligament in rabbits

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Abstract

BACKGROUND: LARS ligament was designed by JP Laboureau in 1985. Clinical applications have proved the artificial ligament is satisfactory in a middle- and short-term, but few reports the histological turnover after implantation.

OBJECTIVE: To study the histological characteristics and ultrastructure of polyethylene terephthalate (PET) LARS artificial ligament after the reconstruction of anterior cruciate ligament in rabbits.

DESIGN, TIME AND SETTING: Randomized control experiments were conducted at the laboratory in the Second Affiliated Hospital of Soochow University from January to December in 2007.

MATERIALS: PET LARS ligaments were the stump of artificial posterior cruciate ligament obtained from operations (provided by Shanghai Kelong Company Limited). Twelve skeletally matured New Zealand white rabbits were used in this study.

METHODS: Twelve rabbits were divided into two groups according to systematic sampling. The PET LARS was transplanted to substitute the original anterior cruciate ligament, and the transplanted PET LARS was covered with the remnant of anterior cruciate ligament in 9 rabbits (L-LARS group), while only PET LARS was transplanted in 3 rabbits, which no covering with the remnant of anterior cruciate ligament (LARS group).

MAIN OUTCOME MEASURES: The grafts and synovium were harvested at 1, 3 and 6 months after implantation, and were processed into the stain by hematoxylin-eosin and Masson. Transmission electron microscope investigation was performed on the grafts at 6 months to observe ultrastructural findings.

RESULTS: At 1 month after implantation, the grafts in joints were covered with recipient connective tissues in L-LARS group, but were not covered anything after 6 months in LARS group. At 3 months, there were moderate to severe inflammatory reaction or foreign body reaction adjacent to the LARS fibers in bone tunnel or between LARS ligament fiber bundles. At 6 months, there were still irregularly aligned collagen fiber bundles slightly or in some portions. The tissue in the LARS ligament showed no mature ligamentization. Inflammatory cell reaction or foreign body reaction began to diminish. Marked trabecular bone grew into the bone tunnels, newly formed woven bone originated from the wall of bone tunnel and grew into the artificial materials. Electron microscopy investigation showed the tissue near LARS fibers was highly cellular with collagen fibrils (50–100 nm diameter). Among the collagen fiber bundles of the stroma were numerous osteoblasts and fibroblasts that were elongated, with large nuclei and an abundant, granular endoplasmic reticulum.

CONCLUSION: The PET LARS ligament show good biocompatibility. Using recipient tissues cover LARS ligament could facilitate its "biolization". Whether there is bone ingrowth in the bone tunnel of this artificial ligaments should be investigated further.

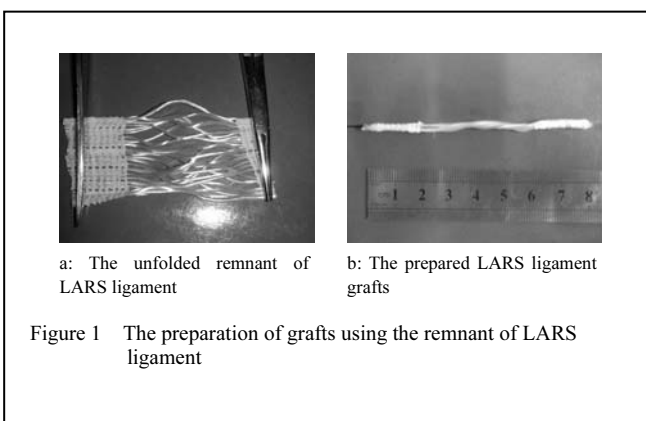
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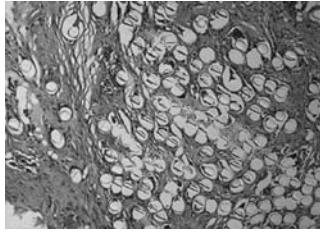
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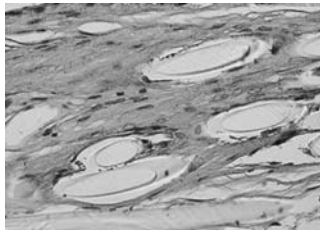
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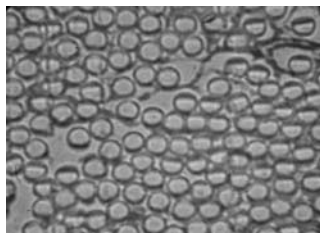




a: Collagen fibers grew into the inter-fiber of LARS ligament in the group of L-LARS at one month after implantation ($\times 100$)

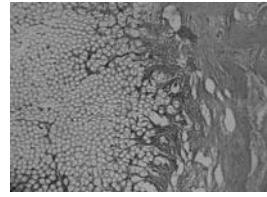


b: Collagen fibers appeared to be more oriented in the group of L-LARS at six months after implantation ($\times 200$);

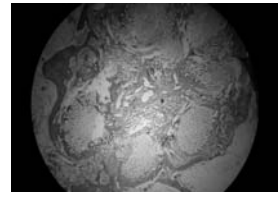


c: No collagen fibers ingrew into the inter-fiber of LARS ligament in the group of LARS at six months after implantation ($\times 100$)

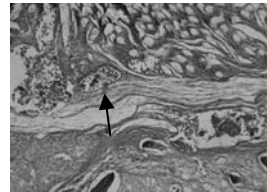
Figure 2 Histology of LARS ligament grafts (Hematoxylin-eosin staining)



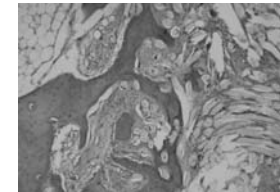
a: Fibrous connective tissues filled the bone-artificial ligament and grew into the artificial ligament fiber bundles at one month after operation ($\times 100$)



b: Fibrous connective tissues encapsulated the LARS ligament at three months after operation ($\times 200$)

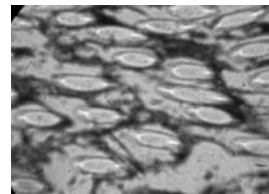


c: Inflammatory response appeared in bone tunnel in the group of LARS (Arrow indicated megakaryocytes)

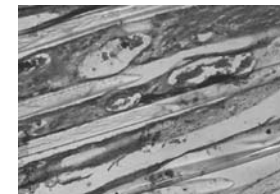


d: New woven bone encapsulated partial fibers of LARS ligament at six months after operation ($\times 400$)

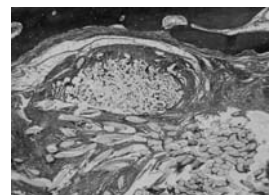
Figure 3 Histology of bone tunnel of grafts in the groups of LARS and L-LARS (Hematoxylin-eosin staining)



a: Collagen fibers grew into the fiber bundles of LARS ligament at one month after operation in the group of L-LARS ($\times 100$)

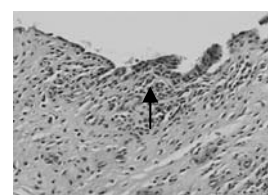


b: New vessels appeared among the fibers of LARS ligament at three months after operation in the group of L-LARS ($\times 100$)



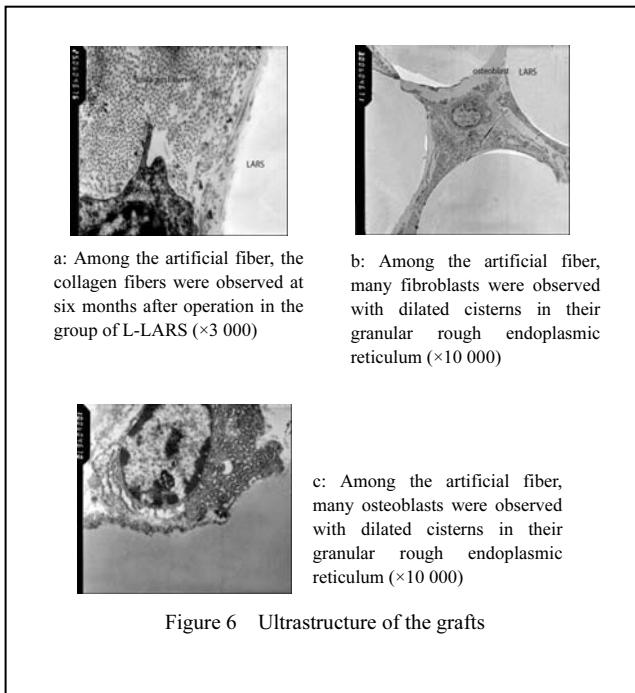
c: The detritus were noted among the fibers of LARS ligament in the bone tunnel at six months after operation in the group of LARS ($\times 100$)

Figure 4 Photograph of LARS ligament stained by Masson



Inflammatory response remarkably decreased in the group of LARS (Arrow indicated monocytes)

Figure 5 Histocompatibility of the grafts ($\times 100$)



1 Mascarenhas R, Macdonald PB. Anterior cruciate ligament reconstruction: a look at prosthetics - past, present and possible future. *Mcgill J Med* 2008;11(1):29-37

2 Poddevin N, King MW, Guidoin RG. Failure mechanisms of anterior

cruciate ligament prostheses : in vitro wear study . *J Bio med Mater Res* 1997; 38(4):370-381

3 Amis AA, Kampson SA. Failure mechanism of polyester fiber Anterior cruciate ligament implants: a human retrieval and laboratory study. *J Biomed Mater Res* 1999; 48(4):534-539

4 Frank CB, Jackson OW. The science of reconstruction of the Anterior cruciate ligament. *J Bone Joint Surg* 1997; 79 (A) :1556-1576

5 Laboureaux JP, Marnat-Perrichet F. Isometric reconstruction of the anterior cruciate ligament. Determination of the femoral and tibial tunnels. *Acta Orthop Belg* 1996; 62 (Suppl 1): 166-177

6 Ibrahim SA, Ahmad FH, Salah M, et al. Surgical management of traumatic knee dislocation. *Arthroscopy* 2008;24(2):178-187

7 Dominkus M, Sabeti M, Toma C, et al. Reconstructing the extensor apparatus with a new polyester ligament. *Clin Orthop Relat Res* 2006;453:328-34

8 Wu YL, Wu HS, Li XH, et al. *Shiyong Guke Zazhi* 2007;13(1):4-6

9 Wang Y. *Guowai Yixue: Chuangshang yu Waikexue Jichu* 1999;20(1): 27-29

10 Lavoie P, Fletcher J, Duval N. Patient satisfaction needs as related to knee stability and objective findings after ACL reconstruction using the LARS artificial ligament. *Knee* 2000; 7(3): 157-163

11 Nau T, Lavoie P, Duval N. A new generation of artificial ligaments in reconstruction of the anterior cruciate ligament. *J Bone Joint Surg (Br)* 2002; 84(3): 356-360

12 Chen SY, Hong GW, Chen JW, et al. *Zhongguo Yixue Gongcheng* 2007; 15 (12) :949-953

13 Dong QR, Xu YJ, Cheng HN, et al. *Jiangsu Yiyao* 2007; 33(10):987-988

Trieb K, Blahovec H, Brand G, et al. In vivo and in vitro cellular in growth into a new generation of artificial ligaments. *Eur Surg Res* 2004; 36(3): 148-151

11 The Ministry of Science and Technology of the People's Republic of China. Guidance suggestion of caring laboratory animals. 2006-09-30 [2008-4-25]. http://www.most.gov.cn/zfwj/zfwj2006/200512/t20051214_54389.htm.

12 Talbot M, Berry G, Fernandes J, et al. Knee dislocations: experience at the Hôpital du Sacré-Coeur de Montréal. *Can J Surg* 2004 ;47(1):20-24

13 Fan QB, Fan JF. *Zhongguo Xifu Zhongjian Waikexue Zazhi* 2008;22 (6):676-679