## ALTER **G** Case Study

# ACL Reconstruction & Microfracture

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**Who:** 19-year-old female snowboarder s/p ACL reconstruction and microfracture surgery after crashing during boarder cross race.

What: Body weight support was incorporated into the rehabilitation protocol once patient cleared for Partial Weight Bearing.

**Why:** The AlterG Anti-Gravity Treadmill<sup>™</sup> was incorporated into the athlete's rehabilitation plan to normalize gait pattern, progressively load lower extremity safely, establish athletic confidence, and maintain fitness levels.

## Introduction

19 y/o female Snowboard athlete sustained an ACL tear and medial and lateral meniscal tear during sport activity. Boarder Cross snowboard is a dynamic sport, including explosive bouts of snowboarding, jumps and turns.

- **1.** Athlete crashed during a race. Diagnostic imaging confirmed diagnosis of an ACL tear and medial and lateral meniscal tear.
- 2. Upon diagnosis the athlete elected for surgical intervention

## Goals

- Following release to partial weight-bearing, incorporate de-weighting into rehabilitation protocol
- Develop a progressive return to activity
- Maintain fitness and function during rehabilitation
- Return to participation

## History

#### Plan

• Athlete was diagnosed with an ACL tear and medial and lateral meniscus tear

• Upon consultation with treating physician and review of diagnostic imaging, the athlete elected to undergo surgery to reconstruct the ruptured ligament and to address the torn meniscus. A microfracture procedure of the femoral condyle was also performed

• After physician release to partial weight-bearing, a complementary conditioning program was developed incorporating the AlterG Anti-Gravity Treadmill

• Along with traditional medical treatment: modalities, therapeutic exercise and NSAID's, the AlterG Anti-Gravity Treadmill was added to the treatment protocol

• Program duration was for 20 weeks

• AlterG Anti-Gravity Treadmill was incorporated after post-op week 12, athlete was cleared for partial weight-bearing

• Athlete achieved desired competition goals and returned to full participation

#### **Considerations**

Pain/ soreness levels were considered and used to gauge weight percentage and speed. Pain level reported by athlete was not to exceed 4 on a scale of 1-10 during Phase I, and not to exceed 3 on a scale of 1-10 during Phases II-IV

Gait training was incorporated into treatment
protocol

Athlete feedback was considered prior to each
workout



### Results

The athlete was released for return to sport by the treating physician after 20 weeks of rehabilitation. The athlete achieved the goals of the rehabilitation plan, incorporating a progressive sport specific conditioning plan to transition the athlete to full participation. The AlterG Anti-Gravity Treadmill was incorporated into the athlete's rehabilitation plan to establish athletic confidence, maintain fitness, manage gait and progressively increase impact on the extremity. The athlete resumed full activity after release from rehabilitation and continued using the AlterG Anti-Gravity Treadmill as part of the reconditioning and sport specific training program.

#### Progression Table 1 (weeks are post-op)

Phase I Week 13-18	Partial Weight-bearing		
	Range of Motion		
	Gait evaluation/ re education		
	Neuromuscular activation		
	Neuromuscular conditioning		
	Pain Management		
	Proprioception		
Phase II Week 19- 24	Weight-bearing as tolerated		
	Emphasize heel to toe walk		
	Pain free activity		
	Proprioception		
	Initiate cardiovascular train- ing		
	Increase load bearing		
	Increase volume		
	Increase strike frequency		
	Increase musculoskeletal strength and endurance		
	Decrease incline of surface		
	Preparation		
	Preparation Full foot strike		
	Preparation Full foot strike Increase intrinsic muscular function		
	PreparationFull foot strikeIncrease intrinsic muscular functionProprioception/Technique		
Phase III Week 25- 28	PreparationFull foot strikeIncrease intrinsic muscular functionProprioception/TechniqueMaintain volume		
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Phase III Week 25- 28 Phase IV Week 29- 32	PreparationFull foot strikeIncrease intrinsic muscular functionProprioception/TechniqueMaintain volumeIncrease intensity/ loadIncrease musculoskeletal strength and conditioningIncrease cardiovascular trainingDecrease angle of surfaceReturn to activityIncrease load and intensityChallenge PropioceptionMaintain Volume		
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#### **Progression Table 2**

(The following table represents the patient's actual device settings during his rehabilitation, beginning post-op week 4, based on his individual progress and pain levels. Please consult a physician before initiating any exercise or rehabiliation program.)

Days	Time	Speed(mph)	Frequency	BodyWeight %	Incline
1-6	8 min	1.5	1 x daily	40%	2 degrees
7 - 13	12 min	2.5	1 x daily	45%	2 degrees
14 - 20	15 min	3.0	1 x daily	50%	2 degrees
21	10 min	4.0	1 x daily	60%	2 degrees
23	15 min	5.0	1 x daily	65%	2 degrees
25	20 min	5.0	1 x daily	65%	2 degrees
28	25 min	5.0	1 x daily	70%	1 degree
31	25 min	5.5	1 x daily	70%	1 degree
34	2 min intervals 2'x10 sets	5.5	1 x daily	70%	1 degree
36	25 min	6.0	1 x daily	75%	1 degree
40	34 min	6.0	1 x daily	80%	1 degree
46	2 min intervals 2'x10 sets	6.5	1 x daily	80%	1 degree
51	30 min	6.5	1 x daily	85%	1 degree
55	2 min intervals 2'x10 sets	6.5	1 x daily	85%	1 degree
60	30 min	3.5	1 x daily	85%	1 degree
65	30 min	3.5	1 x daily	85-90%	1 degree
70	30 min	4.0	1 x daily	85-90%	1 degree
75	30 min	4.0	1 x daily	85-90%	1 degree
80	30 min	4.0	1 x daily	85-90%	2 degrees
85	30 min	4.0	1 x daily	85-90%	0 degree
90	30 min	4.5	1 x daily	85-90%	0 degree
95	30 min	4.5	1 x daily	85-90%	0 degree
100	30 min	4.5	1 x daily	85-90%	0 degree
100-119	30 min	4.5	1 x daily	85-90%	0 degree
120-140	30 min	5.0	1 x daily	85-90%	0 degree

