INTRODUCTION

Objective: comparison of GNRB® versus MRI in the diagnosis of different patterns of anterior cruciate ligament tears.

Requirements: patients operated for ACL tears or ACL tears + meniscus.

Exclusion Criteria: all patients without isolate ACL tears (without other ligament and bone injuries), patients were not get primary surgery.

Collection of Data: Database of Dr Henri ROBERT (surgeon, specialist on ACL surgery: operative report, MRI (1.5 T) report and GNRB database for all patients).

Group of patients

2 groups:
- Patients with complete ACL tears
- Patients with partial ACL tears

STATISTICAL TEST

We use sensibility like an indicator for average method.

Binary criteria: ACL tears (partial or complete)

Acceptability

For MRI report, if it required interpretation, it shall be null. It must be clearly mentioned complete or partial tears in the conclusion report.

For GNRB, if delta for both knees >3 mm = complete tears and if 1.5 mm ≤ delta <3 mm, partial tears.

Non Inferiority Test

Estimate value: \( P_r \) (MRI’s sensibility [1]) by \( \Pi_r = 0.57 \)

Estimate value: \( P_e \) (GNRB’s sensibility [2,3]) by \( \Pi_e = 0.84 \)

It set \( \alpha = 5 \% \) unilateral, \( \beta = 10 \% \) and \( \delta = 10\% \).

Number Needed to Treat (NNT):

\[
\text{NNT} = \frac{2(u_\alpha + u_\beta)^2 \times [\Pi_r(1-\Pi_r) + \Pi_r(1-\Pi_e)]}{[(\Pi_e-\Pi_r)-\delta]^2}
\]

\[
= 34 \text{ subjects by group at the minimum (}\ n_t = 68 \text{ subjects)}
\]

For estimation by confidence interval (CI) of difference of proportions:

With \( P_e = \text{GNRB’s sensibility} \) and \( P_r = \text{MRI’s sensibility} \)

And \( Ne = Nr \)

Condition for application

- \( n_r, n_e \geq 30 \)
- \( n_r p_r, n_e p_e, n_e (1-p_e), n_r (1-p_r) \geq 5 \)

Formula

\[
(p_e - p_r) \pm u_\alpha \cdot \sqrt{\frac{p_e (1-p_e)}{n_e} + \frac{p_r (1-p_r)}{n_r}}
\]
RESULTS

This study was performed on data from previous years and two years before for 200 operated patients in total. After exclusion of 64 medical files (one of the 3 data is missing : GNRB, MRI or arthroscopic report), 62 tears were partial and 74 complete with arthroscopy report.

For complete tears, MRI’s sensibility was 0.76 and GNRB’s sensibility 0.73. For partial tears, MRI’s sensibility was 0.30 and GNRB’s sensibility 0.62.

DISCUSSION

This results shows equivalence for ACL’s complete diagnostics (for MRI and GNRB reports) with the literature and for incomplete ACL tears, it’s slightly lower than literature.

Table2. Sensibility and specificity of GNRB in the literature

<table>
<thead>
<tr>
<th>Complete ACL</th>
<th>Sensibility</th>
<th>Specificity</th>
<th>Partial ACL</th>
<th>Sensibility</th>
<th>Specificity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Robert H [5]</td>
<td>70%</td>
<td>99%</td>
<td>80%</td>
<td>87%</td>
<td></td>
</tr>
<tr>
<td>Klouche S [3]</td>
<td>92%</td>
<td>96%</td>
<td>92%</td>
<td>98%</td>
<td></td>
</tr>
<tr>
<td>Di Ioro A</td>
<td>84%</td>
<td>81%</td>
<td>72%</td>
<td>85%</td>
<td></td>
</tr>
<tr>
<td>Lefevre N</td>
<td>62%</td>
<td>75%</td>
<td>87%</td>
<td>87%</td>
<td></td>
</tr>
<tr>
<td>Beaurain F</td>
<td>73%</td>
<td></td>
<td>62%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

This results shows equivalence for ACL’s complete diagnostics (for MRI and GNRB reports) with the literature and for incomplete ACL tears, it’s slightly lower than literature.

Table3. Sensibility of MRI in the literature

<table>
<thead>
<tr>
<th>Complete ACL</th>
<th>Partial ACL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beldame J [1]</td>
<td>57%</td>
</tr>
<tr>
<td>Steltzen C [4]</td>
<td>32%</td>
</tr>
</tbody>
</table>

Sensibility’s results (for MRI and GNRB reports) for this study are equivalent for complete and partial tears diagnostic in the literature.
CONCLUSION
Sensibility of GNRB laximetry is quite the same than MRI for complete tears but superior for partial tears.

REFERENCES