

# Diagnosing Meniscal Lesions... not so hard if there is a "good" history!

- 1) History of a specific trauma involving tibia or femoral rotation on a weight bearing foot
- 2) Reports of "clicking" since the injury
- 3) Reports of knee "buckling or giving way"
- 4) Reports of knee spontaneously "locking"

## Meniscal Tests...as accurate as MRI!!

**Reference:** Muellner T et al. 1997 The diagnosis of meniscal tears in athlete's; A comparison of clinical and MRI investigations. American Journal of Sports Medicine (25):1;7-12

Magnetic resonance imaging (MRI) is considered to be a "gold standard" test for diagnosing meniscal lesions, however it is not easily accessible, it is expensive and usually involves being on a long waiting list.

This study supported that taking a good history and using a group of tests to stress the meniscus may be as accurate, sensitive and specific as MRI.

	Clinical	Testing MRI
<b>Accuracy:</b>	94.5%	95.5%
<b>Sensitivity:</b>	96.5%	98%
<b>Specificity:</b>	87%	85.5%

The testing consisted of all the 6 tests outlined below: (monitoring for symptom reproduction of pain or 'clicking')

### **Test #1: Joint Line Tenderness**

Simply palpate the anterior and posterior tibio-femoral joint.

### **Test #2: McMurray's Test**

Medial and lateral rotation of the tibia performed in various stages of knee flexion.

### **Test #3: Apley's Test**

With the patient in prone and the hip extended to neutral-flex the knee >90° and then rotate and compress the tibia.

**Test #4: Bohler's Test**

Same technique as when testing for the collaterals but we are concerned with the compressive aspect of this test.

**Test #5: Steinman's Test**

Sitting with knee hanging over the exam bed; medial and lateral rotation of the tibia is performed.

**Test #6: Pary's Test**

Flex the knee to 90° and apply a varus stress-this compresses the medial meniscus posterior horn.

**Clinical conclusion:** This study shows us the importance of correlating many tests in order to achieve a more accurate "Physical Therapy diagnosis". This is a practice we should use with most of our investigations.

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