Meniscal tear

What is a meniscal tear?
The menisci are two C-shaped fibrocartilage structures that serve as padding and separate the two bones of the knee joint, the femur (thigh bone) and tibia (lower leg/shin bone). The menisci disperse 30-55 percent of the forces that impact the knee joint. The menisci also provide stability, cushioning and aid in joint lubrication. The medial (inside) meniscus is injured four times as often as the lateral (outside) meniscus.

Who is at risk?
- Children/adolescents who participate in contact sports or activities that involve twisting, pivoting, cutting or deceleration action at the knee (i.e., basketball, football, soccer, hockey, gymnastics, dance, wrestling, etc.).
- Children/adolescents can occasionally get a tear by kneeling, squatting or lifting an object that is too heavy.
- Males are more at risk than females.
- Children/adolescents who have decreased flexibility and strength.
- Children/adolescents who have poor posturing of their legs.
- Children/adolescents who do not rest between sports seasons and overuse of the knee joint.

What are the symptoms?
- Onset of sudden pain, deep in knee joint and on the side of injury.
- The knee may buckle or give way.
- May have swelling in the knee.
- Difficulty extending the knee.
- The knee may lock or have a popping noise.
- Symptoms may develop over a 24-48 hour period after the injury.
- Meniscal injuries can be combined with another injury in the knee.
- Many children/adolescents can walk after injury.

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What are the treatment options?

Conservative/non-surgical treatment:

- Rest from activities that cause pain or “relative” rest.
- Ice the area after activity and when there is swelling/pain for 10 to 20 minutes, once an hour as needed.
- Physical therapy can address pain, swelling, range of motion, flexibility, strength, gait, bracing/taping and sport-training program will usually improve symptoms.

Surgical treatment:

- Most meniscal tears require surgery.
- Surgery usually involves trimming away the torn area.
- Can involve having the placement of sutures to secure the torn area.

What is the time frame for return to activity/sport?

- With small tears that only require trimming, the athlete may return to sports/activities after rehab, usually in eight to 12 weeks.
- With larger tears that require trimming and sutures, the athlete may return back to sports/activities after rehab, usually in three to six months.

What are the long-term side effects of having a meniscal tear in the knee?

- May not be able to return to the same level of activity, as compared to before injury.
- Increased potential for arthritis in adulthood.
- May have injury reoccurrence with tears.