

From Death, Athletic Life

FORMER UCLA BRUINS STAR and current New Jersey Nets rookie Ed O'Bannon may be the most prominent beneficiary of a relatively unknown surgical procedure: repairing anterior cruciate ligament damage with tissue from a cadaver.

Traditional ACL reconstructive surgery entails removing about one-third of a person's own patellar tendon and grafting it to the injured knee. This can weaken the patella and cause patellar tendinitis. What's more, traditional reconstructive surgery actually involves two recoveries, because the graft site has to heal as well.

"If you're trying to repair a torn tendon, particularly in an athlete, you want the strongest, longest-lasting tendon you can find," says Dr. Michael R. Shapiro, who performed the surgery on O'Bannon's knee. "With the traditional graft method, nine or 10 millimeters of a 30-millimeter tendon are grafted. With a donor tendon, you can take the largest amount of tendon you can tubulate—a 25-millimeter tendon can fit through an arthroscopic hole—and it can be rein-

forced with a synthetic substance to make it stronger. This way we can put the strongest thing possible through that arthroscopic hole, and have the best results."

Thousands of people will be looking for donated cadaver tissue this year. Dr. Allan Vakkellon, tissue bank director for the Regional Organ Bank of Illinois (ROBI), a federally designated organ procurement organization, says patellar tendons are in high demand. He estimates 11,000 surgeries will be performed in 1996, noting that they "are very safe and have a good success rate."

Prior to donation, a cadaver's tissue—including, for example, tendons, bones, heart valves, and skin—is rigidly screened for transmissible diseases. Unlike major organs, however, tendons can be preserved by freezing, and most importantly, rejection by the body's immune system is not an issue. Tendons have no blood supply, so the body's immune system does not respond to them as foreign tissue. Therefore, anti-rejection medication is not needed.

Some physicians still eschew

donor tendon surgery in favor of traditional reconstructive surgery. Says Vakkellon: "It's likely they simply haven't had the training; they're from the 'odd school'."

O'Bannon is living proof that the procedure works. After a stellar four-year career at UCLA, he is averaging about 20 minutes a game in the high-stress, physical-

ly demanding NBA. Kelly Thames, a forward at the University of Missouri with NBA potential, is another player who has benefited from this surgery.

"Ed may have an increased chance of arthritis in the knee when he's 40 or 50," Shapiro says, "but his longevity as a player will be determined more by

what happens in the future than by anything that has happened to him so far.

"Ed says he is asymptomatic, with no instability in his knee. He just wants to play ball."

—Carol Slezak
April 21-27 is National Donor Awareness Week. For further information about organ and tissue donation, contact the United Network for Organ Sharing at 800-24-DONOR.



Shapiro: Strongest tendon, best results.