

Patella Dislocation

What is patella dislocation?

Patella dislocation occurs when the kneecap slips out of its place in the patellar groove. It usually moves to the outside (laterally). It can happen when your foot is planted, and you rapidly twist or change direction. When the patella dislocates, the ligaments that hold it in place are often stretching and damaged.

Patella dislocation is common in young active people. There may be pre-existing looseness of ligament, allowing the kneecap to move too much.

The patella tends to move back into place when the leg is straightened. But once the patella has dislocated, there's a good chance it will happen again because of the ligament stretch. Note that a patella dislocation is not the same as a knee dislocation.

What are the symptoms of patella dislocation?

The symptoms of a patella dislocation are:

- a popping sensation when the patella slips out
- pain, which is worse while the kneecap is dislocated
- tenderness on the inner side of the knee
- swelling and sometimes some bruising
- an unstable kneecap (i.e. it tends to want to slip out)

What does your doctor look for?

Your doctor will ask you about your symptoms and how the injury occurred. Your doctor will examine your knee looking for pain, swelling and any signs of damage to blood vessels and nerves. If your knee is dislocated when you see your doctor, it will usually be put back in place (reduced) before other investigations are performed.

What investigations are needed?

You doctor may request an X-ray if concerned about the possibility of patella fracture or other associated fracture.

How is patella dislocation treated?

If you have only dislocated your patella once, treatment will usually involve:

- putting the patella back into place – once the kneecap is back in its groove, the symptoms are rapidly relieved
- pain medication
- protecting the knee with a brace
- investigations (if needed)
- rehabilitation with or without a brace

If you have recurrent patella dislocations, treatment options include:

- non-drug therapy (e.g. physiotherapy to strengthen relevant muscles to reduce patellar instability, use of a splint)
- surgery