




# Infographic. Aspetar clinical practice guideline on rehabilitation after ACL reconstruction: an interactive figure

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This infographic interactively summarises the recommendations derived from the Aspetar clinical practice guideline on rehabilitation after anterior cruciate ligament reconstruction (ACLR).<sup>1</sup> The recommendations can be used by patients, clinicians, researchers and healthcare decision makers as a simple way of knowing the evidence for the effectiveness of interventions during rehabilitation after ACLR and the return to activities criteria.

The guideline was developed in accordance with the Appraisal of Guidelines for REsearch & Evaluation (AGREE II) instrument and used the Grading of Recommendations, Assessment, Development and Evaluation (GRADE) approach. A guideline development group systematically reviewed evidence from randomised clinical trials and systematic reviews to evaluate the effectiveness of rehabilitation interventions and guide clinicians and patients on the content of the optimal rehabilitation protocol after ACLR.

The guideline highlights several new elements of ACLR management such as: exercise initiation, eccentric training, plyometrics training, and cross education which complement a recent systematic review<sup>2</sup> and other existing guidelines.<sup>3</sup>

Exercise interventions should be considered the mainstay of ACLR rehabilitation. Adding modalities in the early phase may allow earlier pain-free commencement of exercise rehabilitation. However, the evidence for some modalities is conflicting, and the adverse effects, as well as the cost and time, required probably outweigh any benefits. Return to running and return to training/activity are key milestones for rehabilitation after ACLR however there is no evidence on which progression or discharge criteria should be used.<sup>4 5</sup> We therefore propose return to running and return to sport criteria based on the current literature and our clinical expertise.

While there is a very low level of certainty for most components of rehabilitation, most of the recommendations were agreed to by expert clinicians. These data may be used as the basis in developing care pathways for rehabilitation after ACLR.

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For more detail, an interactive version of this infographic is available at: <https://www.aspetar.com/acl-recommendations>

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**Contributors** All authors contributed to the development of this infographic.

**Funding** The authors have not declared a specific grant for this research from any funding agency in the public, commercial or not-for-profit sectors.

**Competing interests** None declared.

**Patient consent for publication** Not applicable.

**Provenance and peer review** Not commissioned; externally peer reviewed.



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**To cite** Kotsifaki R, Korakakis V, King E, *et al.* *Br J Sports Med* 2023;**57**:551–552.

Accepted 20 February 2023  
Published Online First 6 April 2023

*Br J Sports Med* 2023;**57**:551–552.  
doi:10.1136/bjsports-2022-106679

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