

# The Importance of the Anterior Cruciate Ligament in Our Knee

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The Anterior Cruciate Ligament (ACL) is one of the four critical ligaments that help stabilize the knee joint and limit joint mobility. The femur (thigh bone) sits on the tibia (shin bone) forming the knee joint. The ACL connects the two bones by attaching anteriorly (toward the front) to the tibia. This prevents the tibia from moving too far forward. Without the ACL, the knee joint would be unstable and be prone to injury.

ACL injuries can occur to anyone, but those involved in high demanding sports such as football, soccer, basketball, and gymnastics, to name a few, are more susceptible to injury and possibly need for surgery.

ACL surgery is known as ACL reconstruction. This involves using a graft to replace the original ACL. The most common graft is the autogenous, which consists of taking or using your own hamstring or patellar tendon in the injured leg. This tendon is then routed through tunnels placed in the femur and tibia and secured to the bone to duplicate the ACL.

Rehabilitation is strongly recommended after surgery. The purpose of rehabilitation is to protect the graft, reduce pain and swelling, increase joint motion along with improve strength, endurance, flexibility, balance, and to return the post-surgical knee to full use.

Surgery isn't for everyone, but if you have hopes of returning to a sport, wanting a "normal" knee, and/or wanting to protect future damage to the knee cartilage, ACL reconstruction maybe the right option. Make sure you consult with your MD or your physical therapist to discuss the right plan for you.