

## The Score of Lysholm and Gillquist for Evaluating Athletes After Knee Ligament Surgery

Overview: Lysholm and Gillquist developed a scoring scale for evaluating athletes after knee ligament surgery. Instability and "giving way" during activity limit athletic performance and are emphasized. The authors are from Linkoping Sweden.

Parameters (total 100 points):

- (1) limp (5 points)
- (2) support (5 points)
- (3) stair climbing (10 points)
- (4) squatting (5 points)
- (5A) walking running and jumping – instability (30 points)
- (5B) walking running and jumping – pain (30 points)
- (5C) walking running and jumping – swelling (10 points)
- (6) atrophy of thigh (5 points)

Parameter	Finding	Points
limp	none	5
	slight	3
	periodical	3
	severe and constant	0
support	full support	5
	requires stick or crutch	3
	weight bearing impossible	0
stairclimbing	no problems	10
	slightly impaired	6
	one step at a time	2
	unable	0
squatting	no problems	5
	slightly impaired	4
	not past 90 degrees	2
	unable	0

walking - instability	never giving way	30
	rarely during athletic or other severe exertion	25
	frequently during athletic or other severe exertion	20
	unable to participate because of instability	20
	occasionally in daily activities	10
	often in daily activities	5
	with every step	0
walking – pain	none	30
	inconstant and slight during severe exercise	25
	marked on giving way	20
	marked during severe exertion	15
	marked on or after walking more than 2 kilometers	10
	marked after walking less than 2 kilometers	5
	constant and severe	0
walking – swelling	none	10
	with giving way	7
	on severe exertion	5
	on ordinary exertion	2
	constant	0
atrophy of thigh	none	5
	1 – 2 cm	3
	> 2 cm	0

score = SUM(points for all of the parameters)

Interpretation:

- minimum score: 0
- maximum score: 100
- The higher the score the better the function.

<b>Score</b>	<b>Outcome</b>
98 - 100	excellent
93 – 97	good to excellent
82 – 92	fair to good
66 – 81	fair
<= 65	poor

based on data in Figure 2 page 152

References:

Lysholm J Gillquist J. Evaluation of knee ligament surgery results with special emphasis on use of a scoring scale. Am J Sports Med. 1982; 10: 150-154.