

INTRODUCTION

Post traumatic knee stiffness has generally been associated with surgical procedures that involve fracture of the long bones of lower extremities or traumatic injuries of the knee joint, such as acute ligamentous injuries. (*Del Pizzo ,1990*)

Free movement of the knee joint depends on the integrity of the various tissues surrounding it as well as the joint itself .the commonest factor interfering with movment is the presence of adhesions.They may occur within the synovial cavity, especially in the suprapatellar pouch,in the capsular and periarticular tissue between the quadriceps and the femur, and in the fascia lata. (*Duthie and Bentley,1996*).

We can diagnose the knee stiffness by clinical examination by inspection of recurrent attachs of effusion usually follow activity of any kind in cases with knee stiffness due to adhesions of the menisci or the retropatellar fat pad of the tibia. (*Helpet , 1982*)

Treatment for this problem has generally involved closed manipulation. If surgery is contemplated, then a major procedure, such as quadrricepsplasty, is generally performed.operative arthroscopy as a treatment alternative for arthrofibrosis is obviously developed.(*Del Pizzo, 1990*)