

SURGICAL OUTCOMES FOR ENDOSCOPIC OLECRANON BURSECTOMY IN THE TREATMENT OF RECALCITRANT OLECRANON BURSITIS

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PURPOSE

To report outcomes for patients who underwent endoscopic olecranon bursectomies

Primary outcome variables were recurrence, wound failure, and returns to the operating room

These outcomes were compared to reported outcomes in the literature for open olecranon bursectomies



Operative extremity with endoscopes inserted

MATERIALS AND METHODS

A retrospective analysis was carried out via chart review and phone interview on 28 patients who had undergone an arthroscopic olecranon bursectomy after failing medical management

Data was collected on current state of the elbow and any complications. Every patient was specifically asked about infections, recurrence, and wound dehiscence resulting in returns to the operating room, hospital, or office.

Demographic variables such as age, race, cause of bursitis, and type of bursitis (septic, aseptic, gout) were recorded

RESULTS

Number of Patients	<u>Average</u> <u>Age</u>	Average follow up time	Patients with no issues related to surgery	Patients with mild issues related to surgery that did not require hospitalization	Patients with issues related to surgery that required hospitalization	Patients who experienced recurrence, return to the operating room, or wound failure
28	68 years	19.6 months	24 (86%)	3 (10%)	1 (4%)	0

Mild Issues include swelling which could be successfully treated with drainage or minor infections which were successfully treated with oral antibiotics and did not reoccur

The <u>hospitalized patient</u> required surgical site drainage and IV antibiotics

RESULTS

	<u>Aseptic Cases</u>	<u>Septic Cases</u>	<u>Cases with gouty tophi</u>
Number of patients	15	13	7 (2 septic, 5 aseptic)
Number of patients who experienced post-operative problems	2	2	1 (aseptic)

DISCUSSION

Our results showed that none of the 28 patients in our study had any wound failure, recurrence, or returns to the operating room.

Degreef et al. reported wound failure rates of 25% and reccurence rates of 22% for open olecranon bursectomies

Germawi et al found revision rates of 11.5% for open olecranon bursectomies

Our results showed none of these adverse outcomes. Rather, the complications seen in our patients were minor infections or swelling treated non-operatively

CONCLUSION

- Our results show that in our elderly patient population, endoscopic olecranon bursectomies were safe and effective with no incidences of wound failure, recurrence, or returns to the operating room
- We believe these findings contribute the growing literature supporting arthroscopic bursectomies

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