



Similar results after Latarjet procedure between primary cases and revision cases after prior arthroscopic Bankart procedure

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Introduction

Anterior shoulder dislocation is frequently perplexed by recurrent instability instability with rates up to 70% in young patients. Recurrent instability has been correlated with bony lesions, young age and contact sports. The optimal surgical modality remains debatable, with the majority of surgeons preferring the Bankart procedure as the primary repair for recurrent instability.



<u>Aim</u>

The aim of this study was to compare the outcomes of mini-open
Latarjet procedure as primary procedure versus revision repair after
failed arthroscopic Bankart repair, in a tertiary teaching Orthopaedic
department in Greece.



Material and methods

- Retrospective comparative study of all patients with traumatic anterior shoulder instability who underwent an open Latarjet procedure either as primary (group 1) or as revision surgery (group 2) from 2012 to 2020
- Clinical and functional outcomes were assessed using the Rowe, Oxford Shoulder Instability, VAS scores
- Rate of recurrence was recorded
- All patients had a minimum follow-up of 2 years

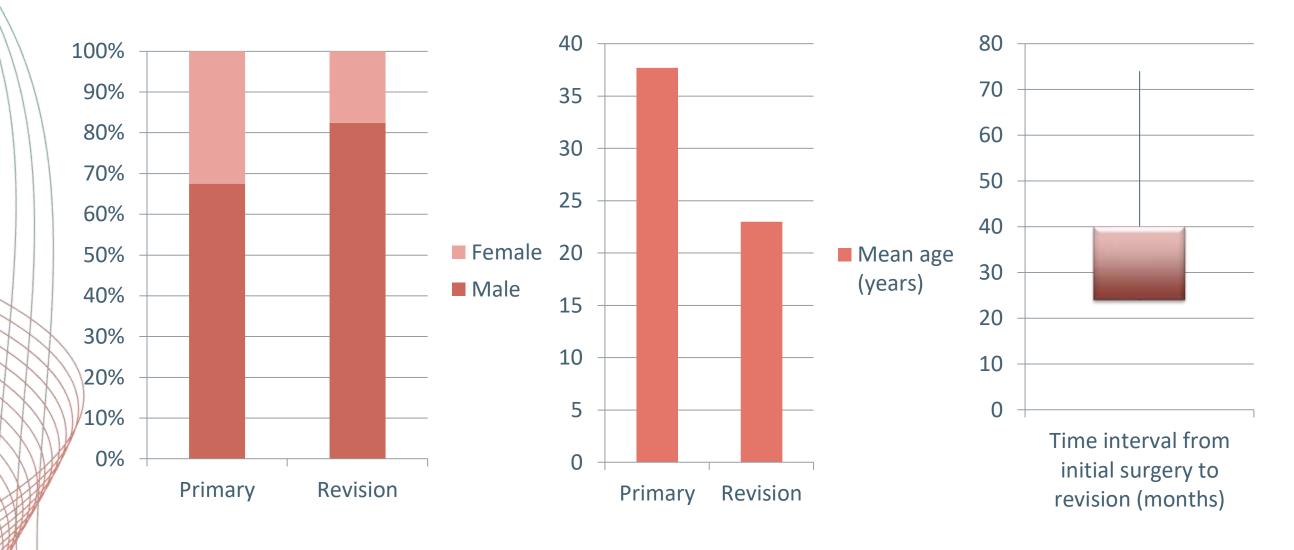


Results

- 43 and 17 patients were included in group 1 and 2, respectively. Mean follow-up was 5,7 years for group 1 and 5,9 years for group 2
- Post-operatively all clinical scores (Rowe, Oxford Shoulder Instability, VAS scores) highlighted a worse status for the revision Latarjet group, but this was not statistically significant (p>0.05)
- Return to daily activities, including sport activities, was also comparable among the two groups
- One patient from each group had recurrent instability (p=.34)
- No major complication was recorded during the follow-up in both groups



Cohort demographics





Post-operative clinical scores 100 90 80 70 60 50 Primary Revision 40 30 20 10 0 **VAS Score** Oxford Shoulder Instability **ROWE Boston** Massachusetts June 18-June 21



Figure 1: X-ray of 29 y.o. male, 10 years postoperatively





Figure 2: 3D CT scan of 29 y.o. male, 3 years postoperatively

Conclusion

- The Latarjet procedure is effective in treating chronic anterior shoulder instability and is associated with high levels of patient satisfaction
- Functional outcome scores, postoperative pain and recurrence rate suggest no significant difference between primary and revision Latarjet procedures



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