

Donor site morbidity and patient satisfaction after arthroscopic superior capsule reconstruction using fascia lata autograft

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COI Disclosure Information

Presenter : Akihiko Hasegawa MD, PhD

I have no financial relationships to disclose.

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Introduction

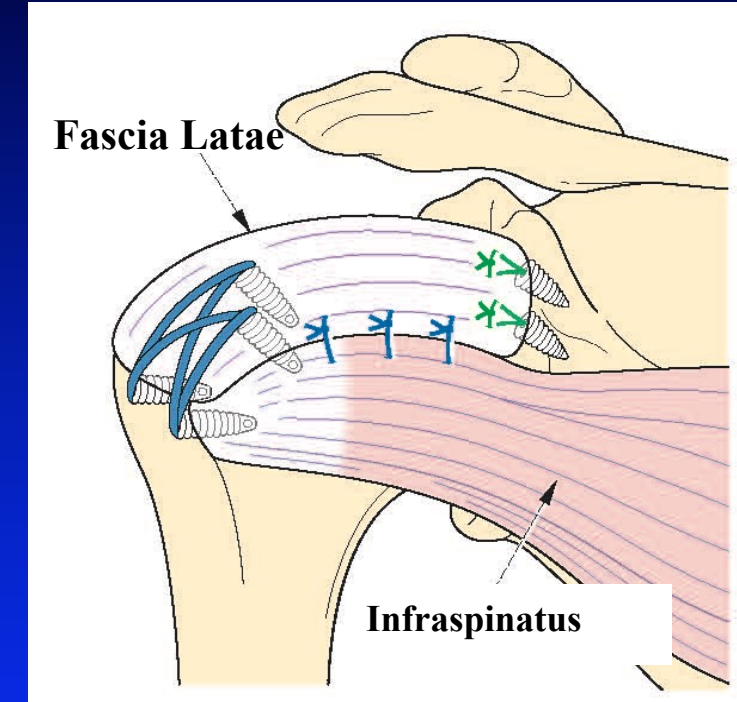
- Arthroscopic superior capsule reconstruction (SCR) using fascia lata autograft is a viable treatment option for irreparable rotator cuff tears (RCTs).
- To date, concerns regarding donor site morbidity potentially associated with autologous fascia lata harvesting is still an argument against fascia lata autograft use although there is a lack of scientific evidence.
- The objective of this study was to assess the donor site morbidity and patient satisfaction after arthroscopic SCR using fascia lata autograft in patients with irreparable RCTs

Methods

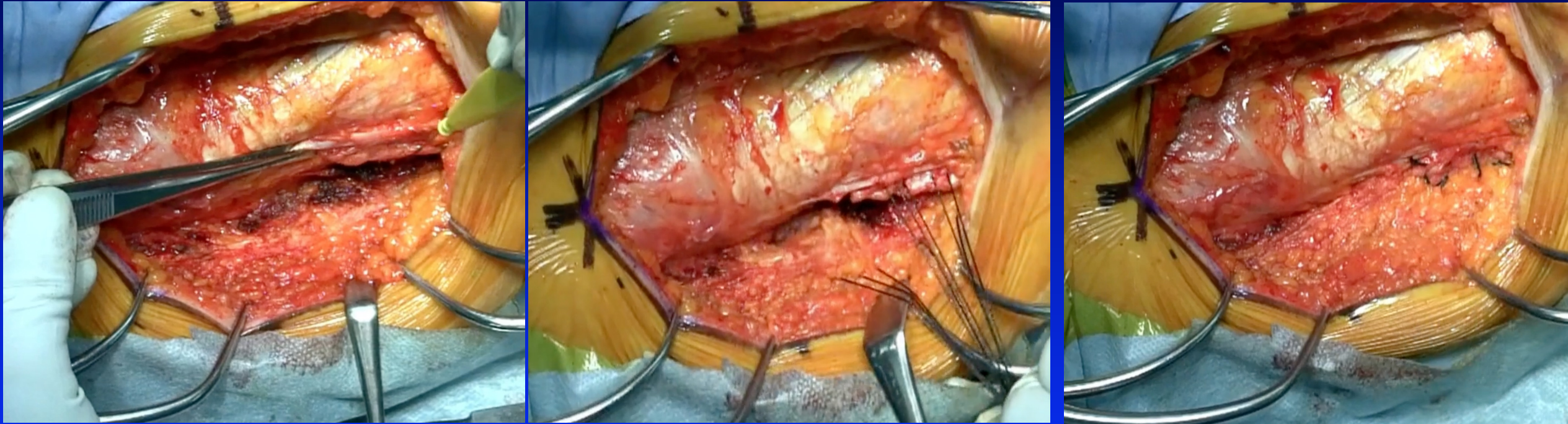
Prospective study

Inclusion criteria

- Consecutive 24 patients with irreparable rotator cuff tears who underwent arthroscopic SCR using a fascia lata autograft between April 2020 and March 2022.
- 2-year follow-up



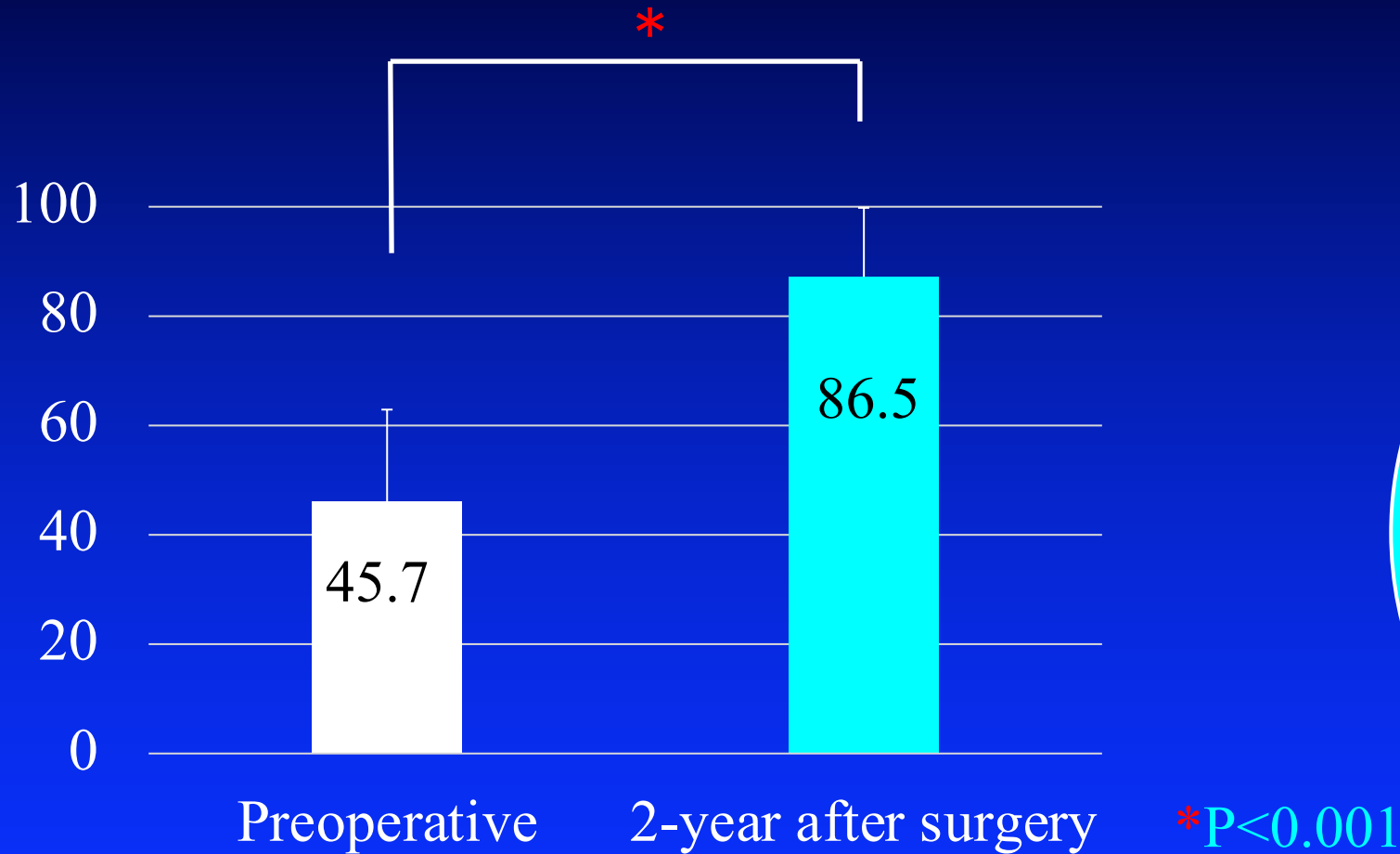
Wound closure



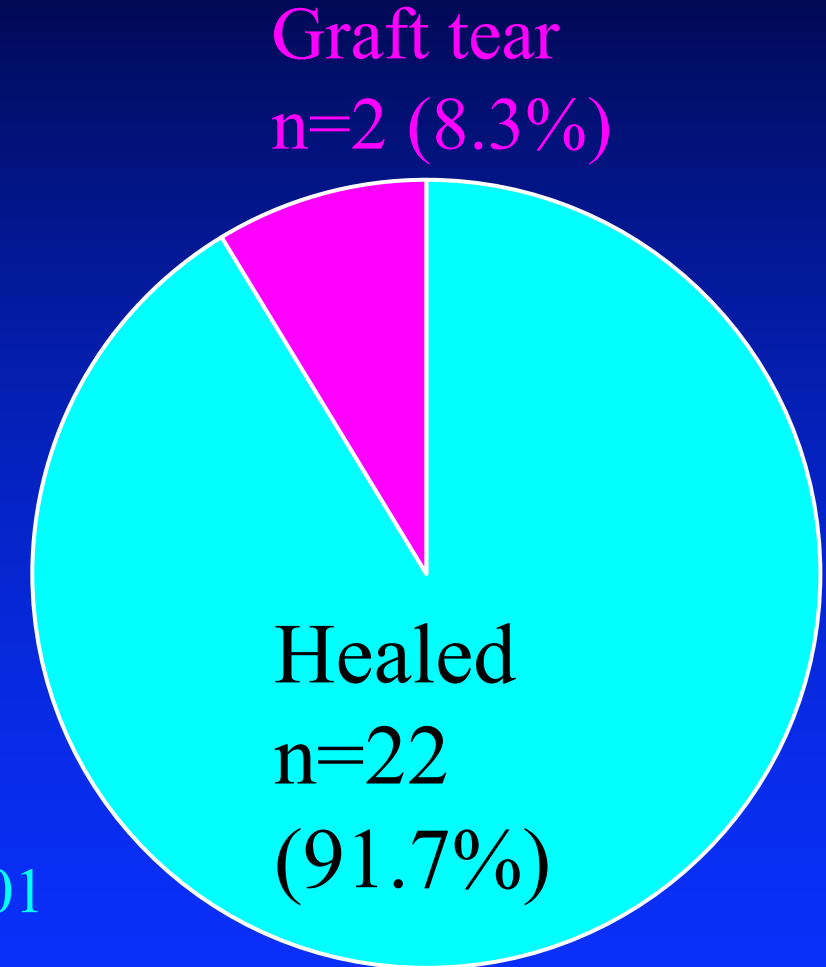
After harvesting fascia lata graft, we sutured between posterior fascia and residual fibers of intermuscular septum to reconstruct the femoral insertion of gluteal major.

Results

ASES score



Graft integrity

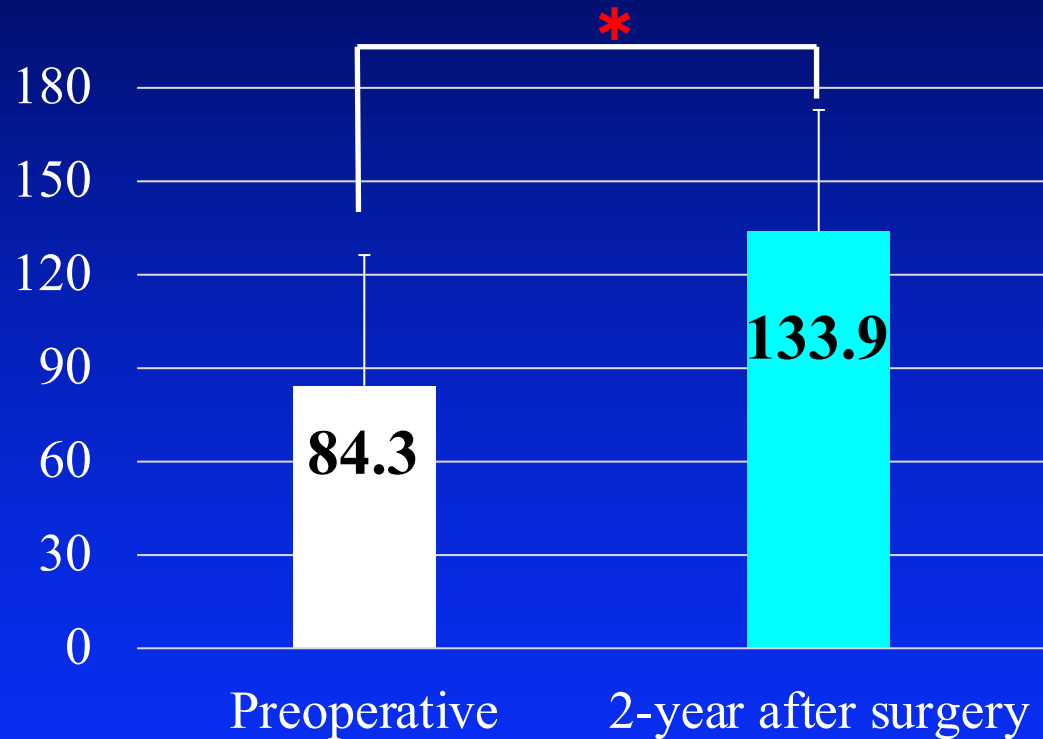


ASES score significantly improved after SCR.

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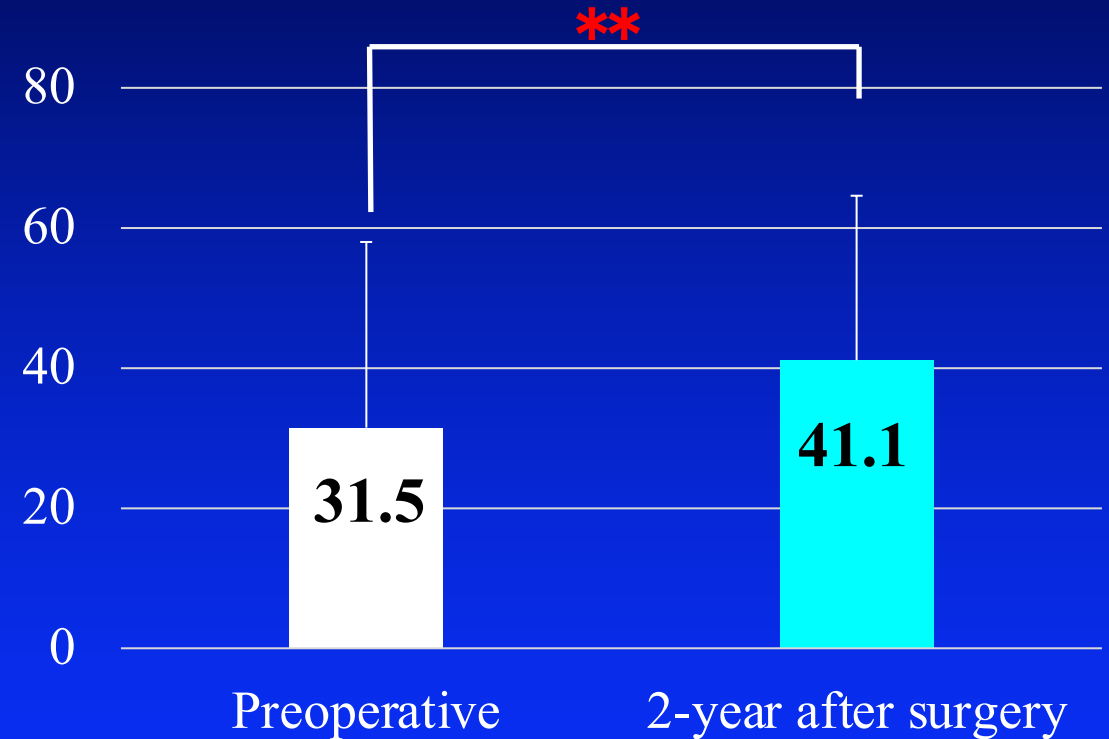
Shoulder ROM

Active elevation



*P<0.001

Active external rotation



**P<0.05

Shoulder ROM significantly increased after SCR.

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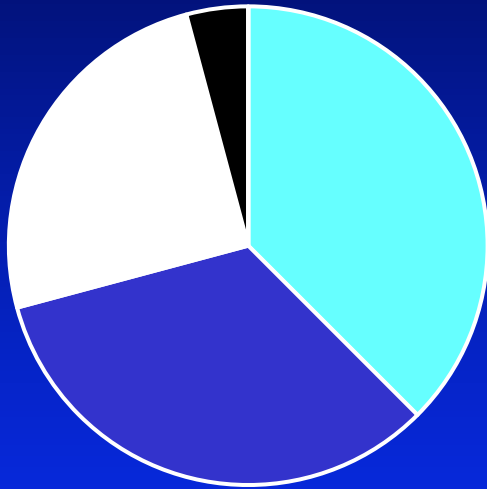
Donor site symptoms (n=24)

Thigh symptoms	n (%)
Local pain	4(16.7)
VAS for thigh pain (0-10), mean	0.9
Local numbness	0 (0)
Thigh herniation	0 (0)
Claudication	0 (0)

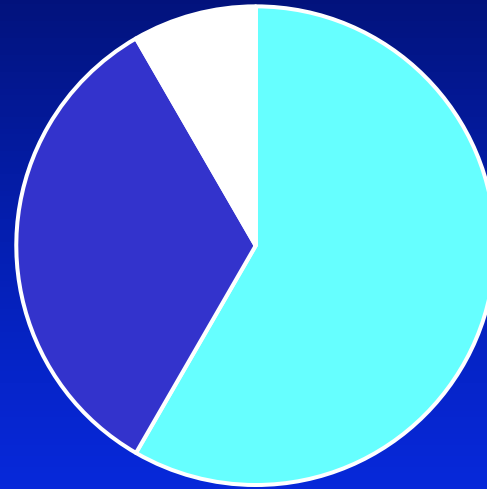
20 of 24 (83.3%) patients reported that there was neither pain nor daily activity limitation, while 4 of 24 (16.7%) patients reported they still had pain at the donor site but not affect activities.

Standardized subjective satisfaction questionnaires

Cosmetic satisfaction

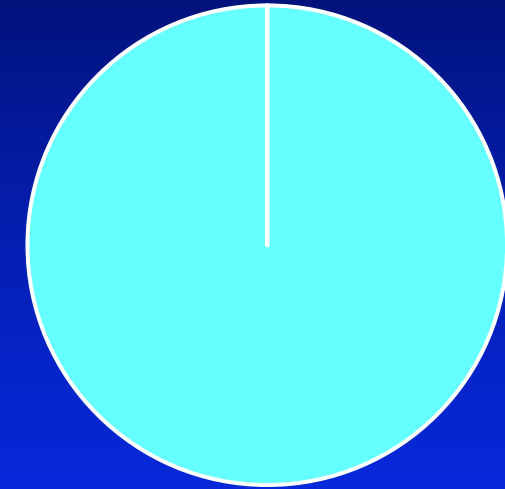


Overall satisfaction



- Very satisfied
- Satisfied
- Moderately satisfied
- Moderately unsatisfied
- Unsatisfied
- Very unsatisfied

Does your shoulder surgery's end result compensate for the changes in the thigh?



- Yes
- No

- In terms of cosmetic satisfaction, 95.8% (23 of 24) patients reported that they were either “very satisfied,” “satisfied,” or “moderately satisfied.”
- As for overall satisfaction, all patients reported that they were either “very satisfied,” “satisfied,” or “moderately satisfied.”
- Furthermore, all 24 patients answered yes to the question “Are the thigh symptoms compensated by the outcome obtained in the shoulder?”

Discussion

Donor site symptoms

Thigh symptoms	Angelo et al. OJSM 2022	This study
Thigh pain	8 (20.5)	3(13.0)
VAS for thigh pain (0-10)	0.6	0.9
Thigh herniation	4 (10.3)	0 (0)
Claudication	0 (0)	0 (0)
Additional surgery for the donor site	0 (0)	0 (0)
n (%)		

Fascia lata autograft harvesting for arthroscopic SCR did not produce significant impact on donor site.

Patient satisfaction

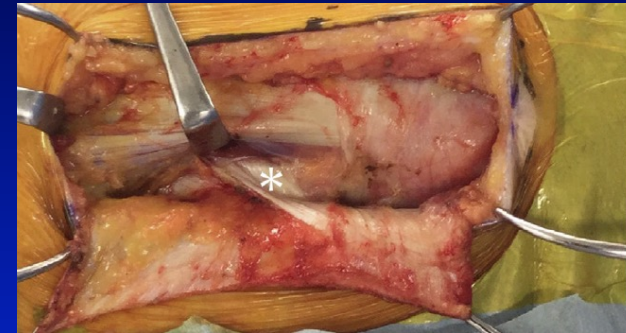
Minimally invasive technique

Angelo et al. KSSTA 2019, OJSM 2022



Our technique

This study



Q1: Cosmetic satisfaction (answered “very satisfied,” “satisfied,” or “moderately satisfied”)
14/15 (93.3%)

22/23 (95.7%)

Q2: Overall satisfaction (answered “very satisfied,” “satisfied,” or “moderately satisfied”)
15/15 (100.%)

23/23 (100%)

Q3: Are the thigh symptoms compensated by the outcome obtained in the shoulder?
37/39 (94.9%)

23/23 (100%)

Arthroscopic SCR using fascia lata autograft achieved high patient satisfaction.
Patients could accept the donor site morbidity given the improvement in shoulder symptom.

Conclusions

- Arthroscopic SCR using fascia lata autograft achieved favorable clinical outcome, high patient satisfaction and minor donor site morbidity.
- Patients could accept the minor donor site morbidity given the improvement in shoulder symptom.

References

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