Category: Shoulder - Instability


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Title:


Abstract:

In young active patients with an arthroscopic Bankart repair a glenoid index > 1.58 had 3.86 times the risk of recurrence than those subjects with a GI = 1.58.

Data:

Purpose: The purpose of this study was to compare the GI (Glenoid-Index) of patients operated on for ABR (Arthroscopic Bankart Repair) who had recurrences with those who did not, and to determine if GI is a risk factor for recurrence after ABR. Methods: Between 2014 and 2018, 148 patients = 18 years old with anterior glenohumeral instability underwent a primary arthroscopic Bankart repair in our institution. We excluded patients with glenoid bone loss, off track Hill Sachs lesions, or incomplete follow-up. We assessed return to sports, functional outcomes and complications. We evaluate the association between the altered GI and the probabilities of recurrence in the postoperative period. Intraclass correlation coefficient (ICC) was used to determine interobserver reliability. Results: The mean age at time of surgery was 25.6 years old (19 to 29), the mean follow-up was 53.3 months (29 to 89). The 95 shoulders who met the inclusion criteria were divided into 2 cohorts, 47 shoulders had a GI = 1.58 (Group A) and 48 had a GI > 1.58 (Group B). At final the follow-up, 5 shoulders in group A (10.6%) and 17 shoulders in group B (35.4%) suffered a recurrence of instability. Those patients with a GI > 1.58 had a hazard ratio of 3.86 (95%CI: 1.42-10.48) (p=0.004) compared with those with a GI = 1.58 of suffering a recurrence. When correlating glenoid index measurements between raters, we observed an intraclass correlation coefficient (ICC) of 0.76 (95% CI: 0.63-0.84), these results fall under the qualitative definition of good interobserver agreement. Conclusion: In young active patients with an arthroscopic Bankart repair an increased GI was associated with significant higher rate of postoperative recurrences. Specifically, those subjects with a GI > 1.58 had 3.86 times the risk of recurrence than those subjects with a GI = 1.58. Level of evidence: 3, retrospective cohort study.

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