deficient labrum. Compared to the Latarjet technique, the ALCOT involves less morbidity and represents a more anatomic glenoid surface by replacing the labrum without changing the bony morphology. In this study, the ALCOT also showed superior stabilization by restoring native force ratio and lateral humerus translation. Further research is necessary to clinically validate this technique, and possibly to expand indications to small degrees of glenoid bone loss.

Category: Shoulder - Instability

**Interobserver Variability of Glenoid Bone Loss Measurement**

Abstract ID# 22958

All Authors:
Rafael Norberto Martínez Gallino MD ARGENTINA
Pablo A. Narbona MD ARGENTINA
Manuel Olmos MD ARGENTINA
Nicolas Ignacio Carranza MD ARGENTINA
Leonardo Javier Carabajal Vera MD ARGENTINA

Summary:
Glenoid bone loss measured with a linear method is easy, reproducible and has excellent interobserver agreement.

Data:
Introduction Glenoid bone loss is associated with anterior shoulder instability and is considered an independent risk factor for arthroscopic capsulolabral repair failure. Therefore, quantitative analysis and accurate measurement are important to determine proper surgical treatment. The aim of the study was to assess interobserver variability of linear method for glenoid bone loss quantification. Methods: Thirty patients with shoulder instability and CT scans were included. Images were processed in multiplanar reconstruction (MPR) to provide an en face view of the glenoid Linear measurement applying the perfect circle method was performed. Each measurement was performed by four observers with a standardized measurement protocol. Interobserver reliability were analyzed using intraclass correlation coefficients (ICCs), 95% confidence intervals (CIs) Results: Mean values and standard deviation (± SD) of glenoid bone loss were 16.7% ± 9.4 (range 0–36.2); 15.8% ± 9.2 (range 0–37); 15.7% ± 8.2 (range 1.3–35.7); and 16.5% ± 9.9 (range 1.5–38.1) for observer number 1, 2, 3 and 4 respectively, with no significant differences (p=0.96). Interobserver reliability showed ICC values from 0.86 to 0.95. Conclusions: This study showed that glenoid bone loss measured with a linear method is easy, reproducible and has excellent interobserver agreement.