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Return to Play Following Open Latarjet in Under 20 Year Old Collision Athletes

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Investigation performed at The Sports Surgery Clinic, Dublin, Ireland

DISCLOSURE

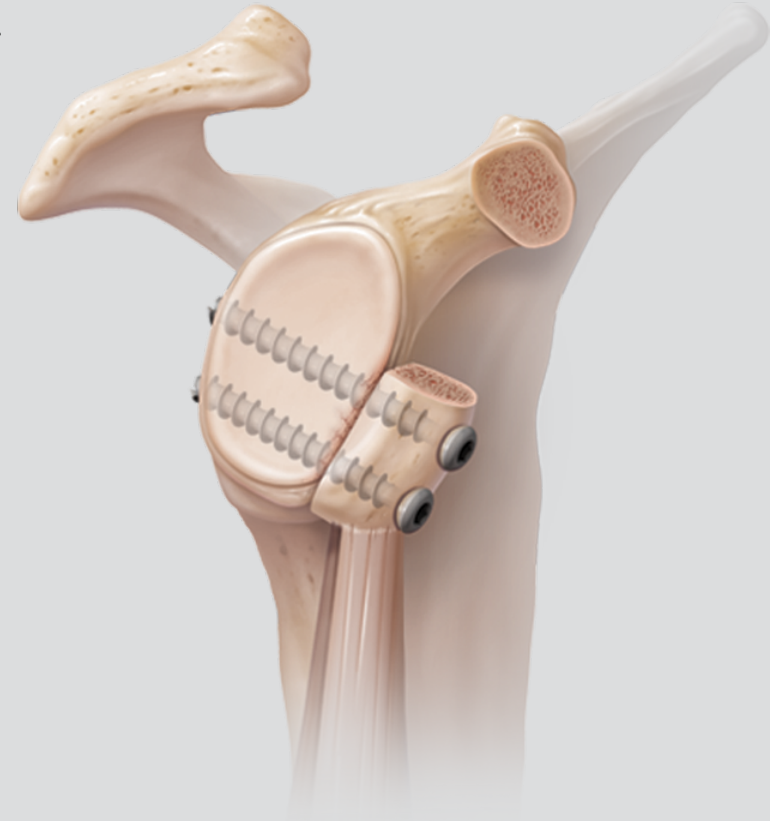


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- None of the authors have anything to disclose

BACKGROUND

- The open Latarjet procedure involves transfer of the coracoid and conjoint tendon to the anterior glenoid face to restore glenoid bone stock and provide stability through the sling effect of the conjoint tendon.
- The open Latarjet procedure has been shown to result in high rates of return to play (RTP) and low rates of recurrent instability, but there is a higher reported complication rate than with arthroscopic Bankart repair.
- As a result of its non anatomic nature, there is a concern with performing a primary Latarjet in younger patients, as well as concern if there is still growth plates open.



PURPOSE



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- The purpose of this study was to evaluate recurrence rates, RTP and clinical outcomes in collision athletes under 20 who underwent open Latarjet for anterior shoulder instability.

HYPOTHESIS

- Our hypothesis was that collision athletes would report excellent clinical outcomes, and high rates of RTP, with low recurrence rates.

METHODS



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- This was a retrospective review of outcomes. The operation notes from all of the Latarjet procedures performed by a single fellowship trained shoulder surgeon from July 2012 to August 2020 were analyzed, and patients were followed-up via phone call and email survey.
- The inclusion criteria for the study were; 1) collision athlete, 2) underwent open Latarjet procedure, 3) 16-20 years old, and 4) minimum 24 month follow-up.

METHODS



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- Detail regarding return to sport including level, timing, and if applicable reasons for not returning to sport at the same level were evaluated.
- Furthermore, follow up included documentation of the ROWE score, the Shoulder Instability-Return to Sport after injury (SIRSI) score, the Visual Analogue Scale (VAS) score, and the Subjective Shoulder Value (SSV) score, recurrence of dislocations or subluxations, revision surgeries, and complications.

METHODS

STATISTICAL ANALYSIS



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- Descriptive statistics were gathered using SPSS version 22 (IBM Corp. Released 2013. IBM SPSS Statistics for Windows, Version 22.0. Armonk, NY: IBM Corp.).
- A p-value of < 0.05 was considered to be statistically significant.

DEMOGRAPHICS



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- The study included 105 male collision athletes with a mean age of 18.9 ± 1.0 years (range: 17-20).
- The mean follow-up was 38.8 ± 26.2 months.
- Forty-eight patients (31%) were lost to follow up, with 43 being uncontactable and 5 declining to participate.
- Overall, 91 (87%) of the participants were playing their sport at a competitive level, with 14 (13%) playing at a recreational level.
- The mean glenoid bone loss was 13%.

RETURN TO PLAY



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Table 1. Return to Play	
	N
Total RTP	93 (88.6%)
Same/Higher Level	73 (69.5%)
Time to RTP	6.3 ± 2.2

RTP; Return to Play, Mo; Month,
N number

Patient Reported Outcomes



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Table 2. Patient Reported Outcomes	
Outcome	Mean Score
SSV	84.1 ± 16.8
SIRSI	69.2 ± 21.8
VAS	2.3 ± 2.1
Satisfied	91.4%

SSV; Subjective Shoulder Value, VAS; Visual Analogue Scale, SIRSI;
Shoulder Instability Return to Sport after Injury.

Recurrent Instability



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Table 3. Recurrent Instability	
Re-dislocation	5 (4.8%)
Revision Surgery	4 (3.8%)
Subluxation	3 (1.9%)
N; Number	

LIMITATIONS



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- Retrospective
- Lack of pre-operative PROMs
- Lack of control group

CONCLUSION



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There is a low redislocation rate among young athletes undergoing open Latarjet for anterior shoulder dislocation at mid-term follow-up. Additionally, there are good clinical outcomes with a high rate of return to play in this population.



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Thank you for your attention