

Open Latarjet Procedure for Collision Athletes versus Non- Collision Athletes

Eoghan T. Hurley, Martin S. Davey, Thomas K. Moore, Sami Khan, Hannan Mullett

Investigation performed at The Sports Surgery Clinic, Dublin, Ireland

DISCLOSURE

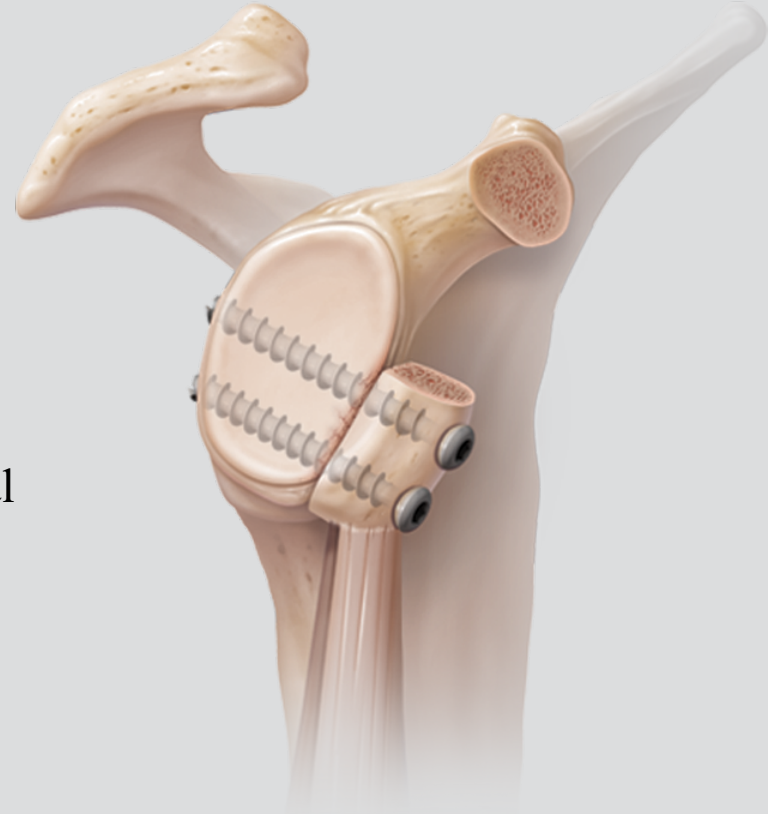


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- None of the authors have anything to disclose

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 purpose of this study was to evaluate recurrence rates, return to play (RTP) and clinical outcomes in collision athletes (CA) compared to non-collision athletes (NCA) undergoing open Latarjet (OL) procedure for anterior shoulder instability.



METHODS



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- A retrospective review of patients who underwent OL procedure for anterior shoulder instability, with a minimum of 24-month follow-up was performed.
- Those who underwent OL as CA were matched in a 3:1 ratio for age, gender and overall follow-up to those who had an OL as a NCA. Rate, level and timing of RTP and Shoulder Instability-Return to Sport after Injury (SIRSI) score were evaluated.
- Additionally, recurrence, Visual Analogue Scale (VAS) score, Subjective Shoulder Value (SSV), Rowe score, satisfaction, and whether they would undergo the same surgery again were compared.

RESULTS



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- A total of 33 athletes who underwent OL as NCA were identified and subsequently pair-matched to 99 patients who were CA who underwent OL, with a mean age of 27.5 ± 7 years and mean follow-up of 40.5 ± 23 months.
- There was no significant difference between the groups for rate of RTP (77% vs 72%, $P=0.65$), rate of RTP at the same pre-injury level (62% vs 54%, $p = 0.42$) or timing of RTP (6.2 ± 1.9 vs 6.8 ± 2.7 months, $p = 0.16$) between the CA and NCA groups.
- There were no significant differences in VAS, SIRSI, SSV, Rowe score, patient satisfaction and whether they would undergo surgery again ($p > 0.05$ for all).
- There was no difference in the rate of recurrent instability post-OL procedure (7.1% vs 9.1%, $P=0.73$) between the CA and NCA groups respectively.

CONCLUSION



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This study demonstrates that OL results in excellent clinical outcomes, high rates of RTP and low recurrence rates for both collision and non-collision athletes in the medium-term follow-up.



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Thank you for your attention