Arthroscopic Latarjet As A Revision Procedure For Failed Arthroscopic Bankart Repair Is As Effective As Primary Procedure For Recurrent Anterior Shoulder Instability. A Case-Cohort Study

Lika Dzidzishvili[1], Claudio Calvo Palma[2], Javier Calvo[1], Antonio M Foruria[1], Diana Morcillo[1], María Valencia[1], Emilio Calvo[1]

1. Hospital Universitario Fundación Jiménez Díaz, Madrid, Spain
2. Department of Orthopaedic Surgery. Pontificia Universidad Católica de Chile, Santiago De Chile, Chile

Aim
To compare subjective and objective clinical outcomes, recurrence and complication rate of arthroscopic Latarjet revision procedure after failed arthroscopic Bankart repair.

Background
The role of arthroscopic revision shoulder stabilization after failed anterior shoulder instability repair is still a matter of debate.

Methods
A unicentric retrospective and comparative case-cohort analysis was performed including sixty-two patients who underwent revision shoulder stabilization using arthroscopic Latarjet technique after failed arthroscopic Bankart procedure (group 1) by the same senior surgeon, were matched with thirty-five patients who had initial arthroscopic Latarjet repair (group 2). Clinical outcomes at a minimum of 24 months postoperatively included Rowe score, the Western Ontario Shoulder Instability Index (WOSI), Constant-Murley Shoulder Outcome score (CS) and Single Assessment Numeric Evaluation (SANE). Dislocations, subluxations, complications, pre and postoperative level of activity were assessed too.

Results
After a mean follow-up of 38 months, fifty-five shoulders (88.7%) were subjectively graded as good to excellent using SANE and thirty-two (91.4%) in the revision and primary surgery group respectively. No significant differences in the Rowe score (91.4 vs 94.1 points) were found between groups 1 and 2 (P =0.223) neither was found statistically significant difference in the CS (90.7 vs 94.0 p=0.105). The average WOSI decreased from 1262 to 510 and from 1119 to 403 for the group 1 and 2 respectively (P=0.049).

Four recurrent dislocations were reported (6.4%) in the revision group and one in the control group (P = 0.140). In two failed cases an Eden-Hybinette procedure was conducted as bone block osteolysis was observed and in remaining two patients extraarticular capsular reinforcement was performed. One case of fracture of the transferred graft and a single case of graft non-union were found, in both cases have no significant influence on the clinical result. One case of stiffness was reported and was resolved with rehabilitation and self-stretching exercises. No neurological complication was recorded.

Patients with revision shoulder stabilization had more problems in returning to previous level of sports participations than patients in the control group (p= 0.023).

Conclusions

Arthroscopic Latarjet procedure after failed arthroscopic Bankart repair seems provide a satisfactory option as a revision surgery with good to excellent subjective patient-reported outcomes including a low recurrence and complication rate. However, decreased level of sports participation is expected.