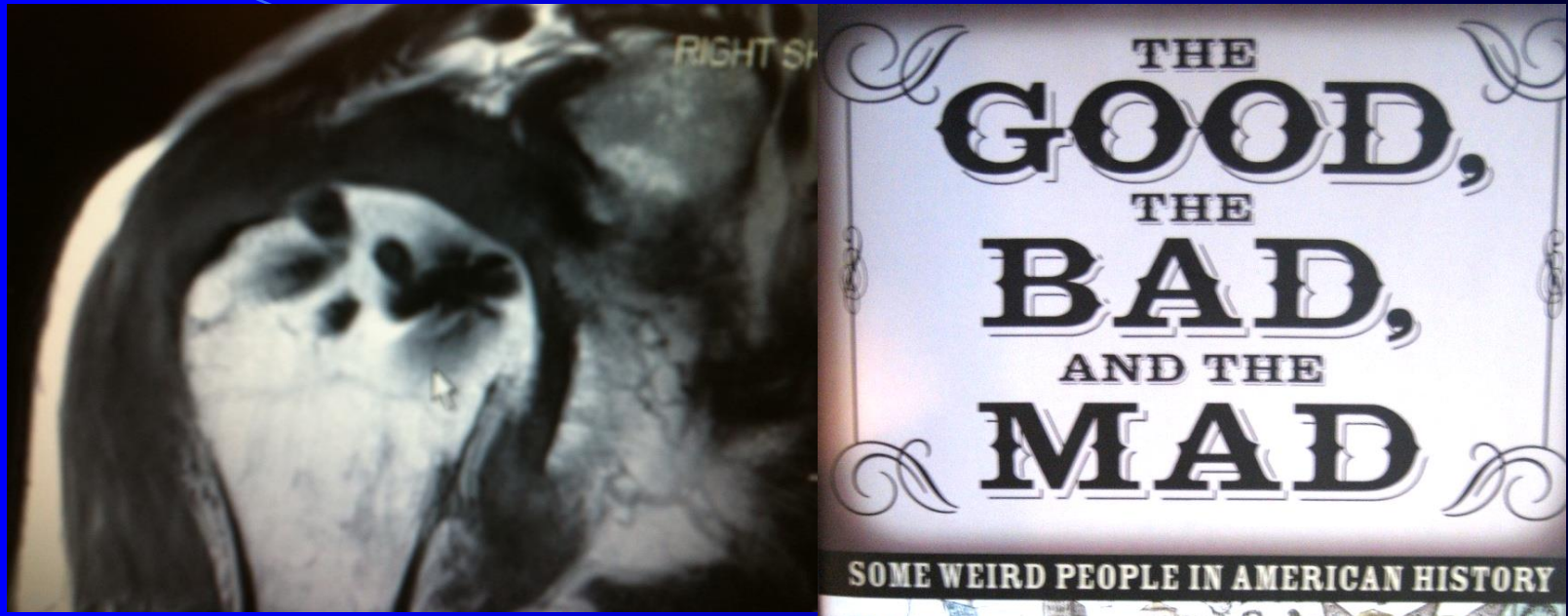


# COMPLICATIONS OF CUFF REPAIR REVISION ISSUES AND OPTIONS



ALAN S CURTIS MD  
BOSTON SPORTS AND SHOULDER  
NEW ENGLAND BAPTIST HOSPITAL

# PATIENT COMPLAINTS

- PAIN
- STIFFNESS
- WEAKNESS
- LOSS OF FUNCTION
  - WORK
  - SPORTS
  - “I WANT MY LIFE BACK”

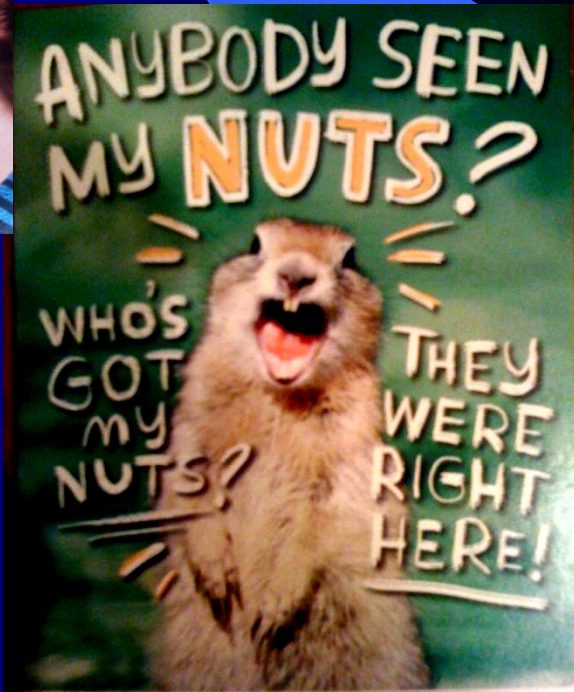
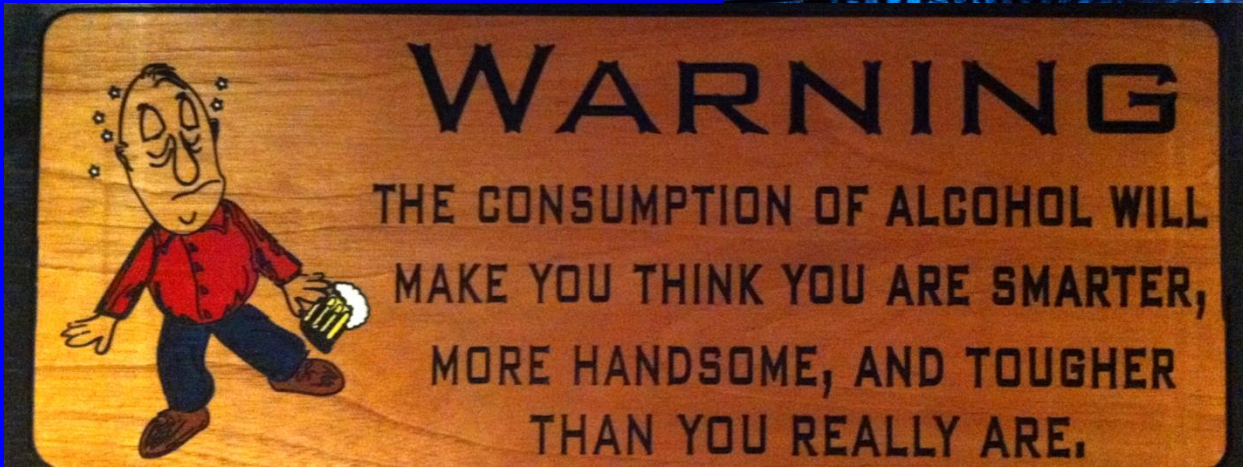
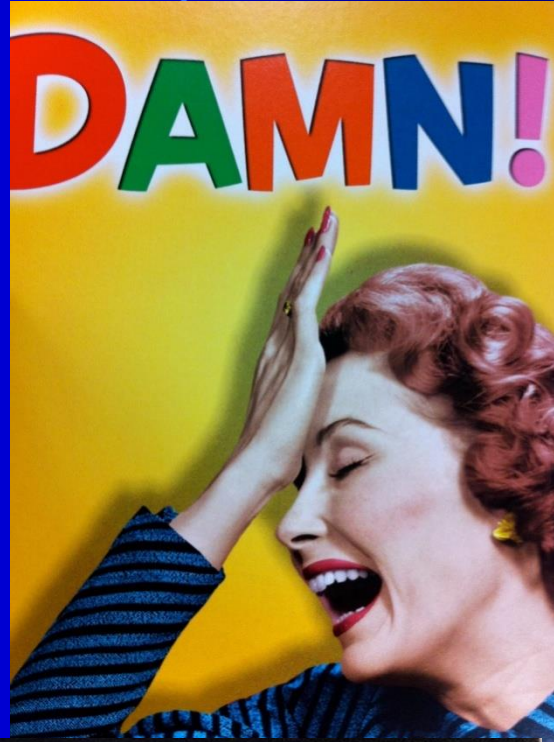
DATE	10/02/1970
OCCUPATION	concrete Finisher
PLEASE DESCRIBE THE PROBLEMS AND SYMPTOMS YOU ARE SEEING THE DOCTOR FOR TODAY	
Shoulder is a mess, lots of pain,	





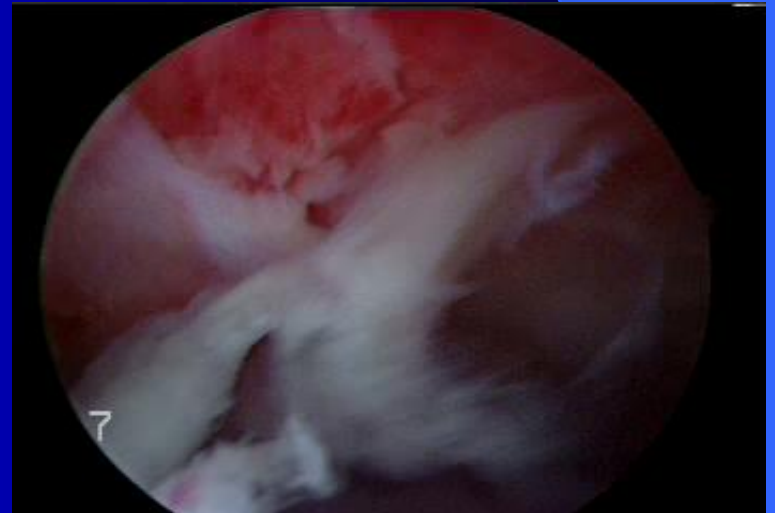
# SECONDARY ISSUES

- ANGER
- DEPRESSION
- FRUSTRATION
- LEGAL HISTORY
  - MVA
  - WORK COMP
- DRUGS/ETOH



# POST OP PAIN FACTORS

- **STIFFNESS**
- **ADHESIONS**
  - MOST COMMON PROBLEM
  - BLEEDING EARLY
  - DIABETIC
  - PRE-OP ADHESIVE CAPSULIS
  - NO PROM
  - **TOO MUCH DONE**



# COMPLICATION FACTORS

- TOO MUCH DONE
- RCR AND .....
- SLAP/LABRAL REPAIRS
- CORACOID ???
- SS NERVE RELEASE ???
- AC JOINT
- BICEPS TENODESIS
- BAD DECISIONS= BAD RESULTS





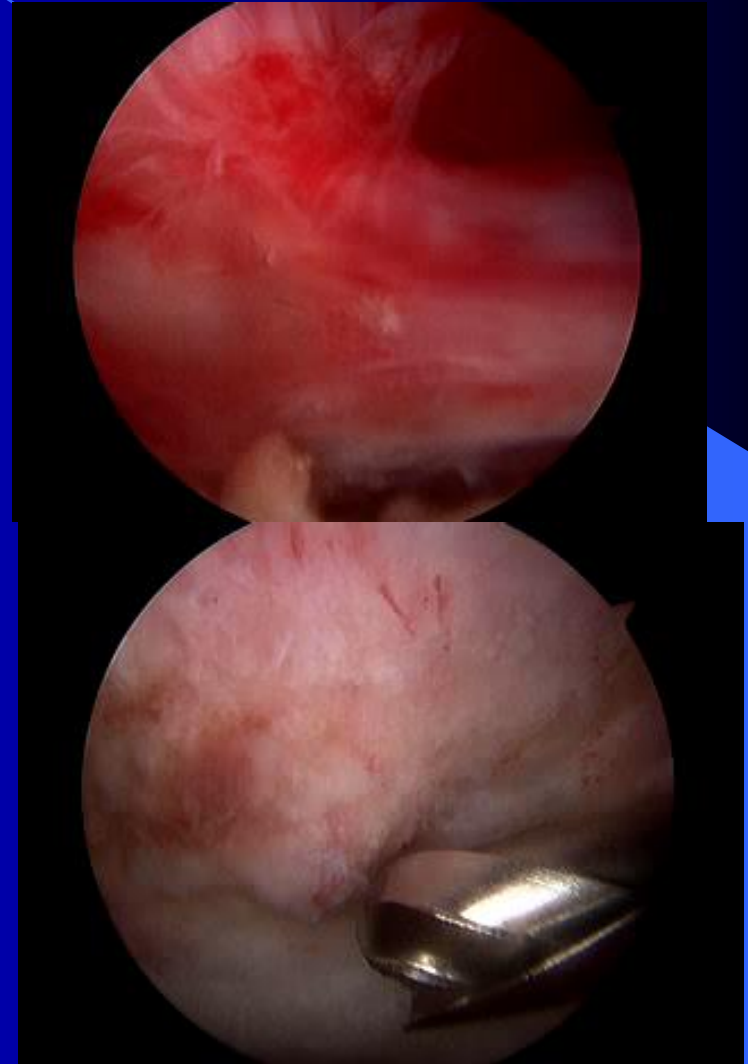
# COMPLICATION FACTORS

- BICEPS PATHOLOGY
  - 40% OF RC TEARS
    - LAFOSSE
- AC JOINT PAIN
  - WORSE WITH STIFFNESS
  - REPITITION



# COMPLICATION FACTORS

- IMPINGEMENT
  - ? ASD DONE
  - INADEQUATE ASD
  - PROMINENT KNOTS OR HARDWARE
- SUBACROMIAL SCAR FORMATION



# WORK UP AND DIAGNOSIS

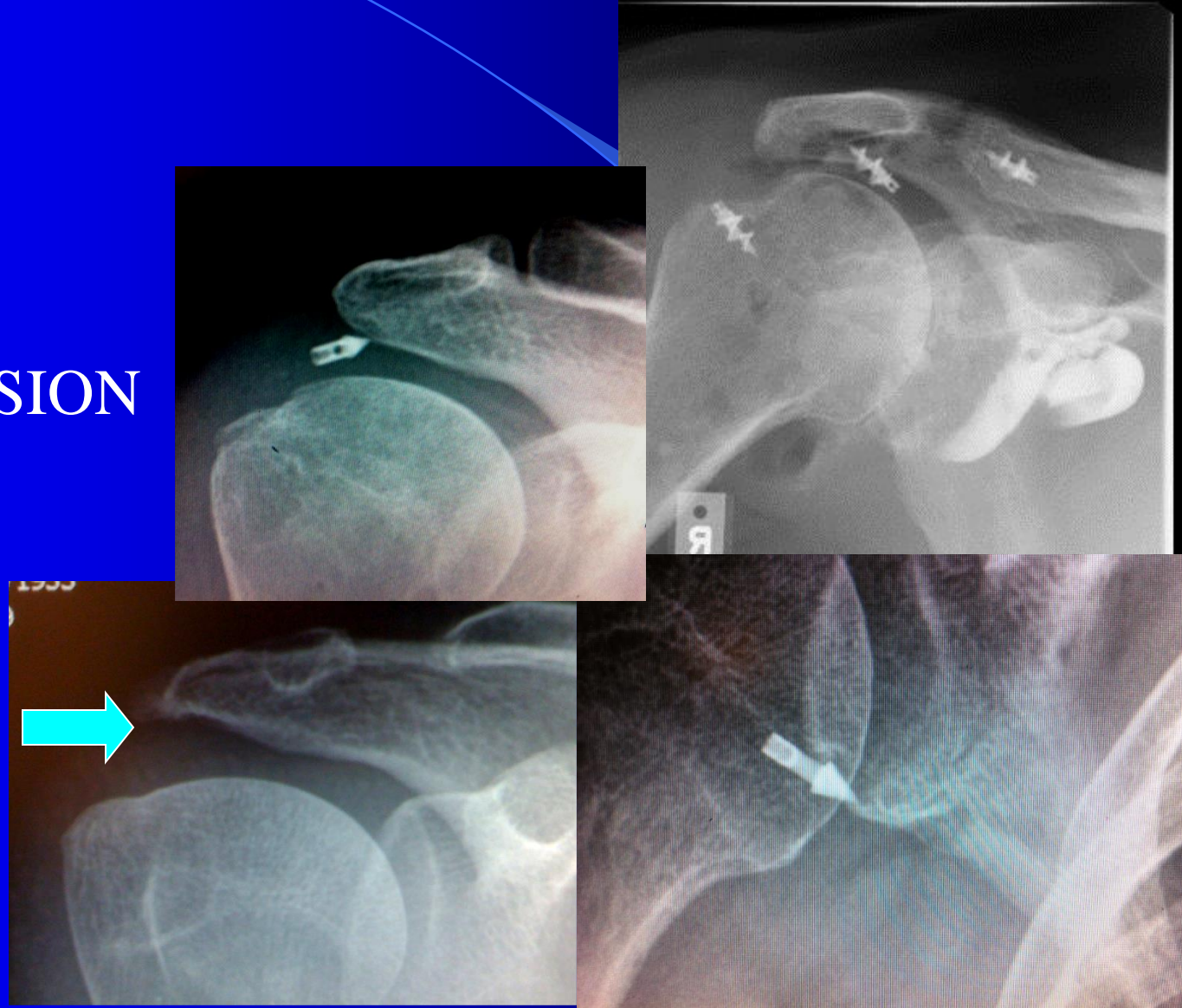
- REVIEW PRIOR OP NOTES
- REVIEW POST OP PT REGIMEN
- LISTEN TO WHAT BOTHERS THE PATIENT THE MOST





# NEW XRAYS

- DJD
- HARDWARE
- PRIOR DECOMPRESSION
- FRACTURES
- AC JOINT



# MRI

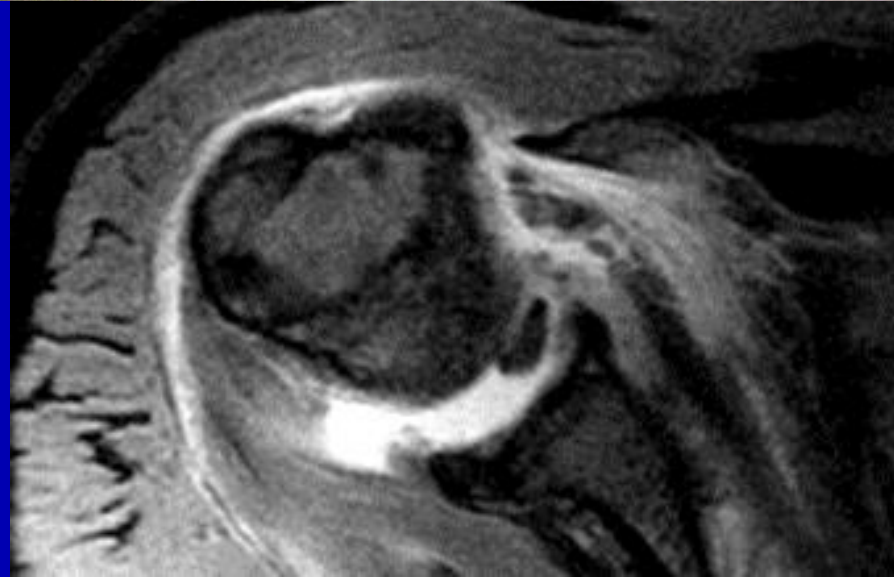
- NO GADOLINIUM
- ? STATUS OF CUFF
- ? EFFUSION
- ATROPHY OF MUSCLES
- LOOK FOR 3D IMAGE OF ACROMION





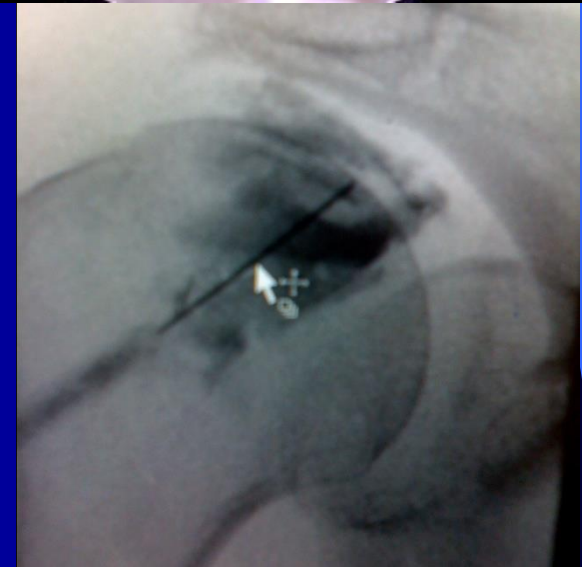
# PHYSICAL EXAM

- FOCUS ON TRUE PAIN POINTS
- PROM LOSS VS AROM LOSS
  - ALL STIFF !
  - PAINFUL END POINTS
- STRENGTH
- DON'T FORGET SUBSCAP TESTING



# TREATMENT OPTIONS

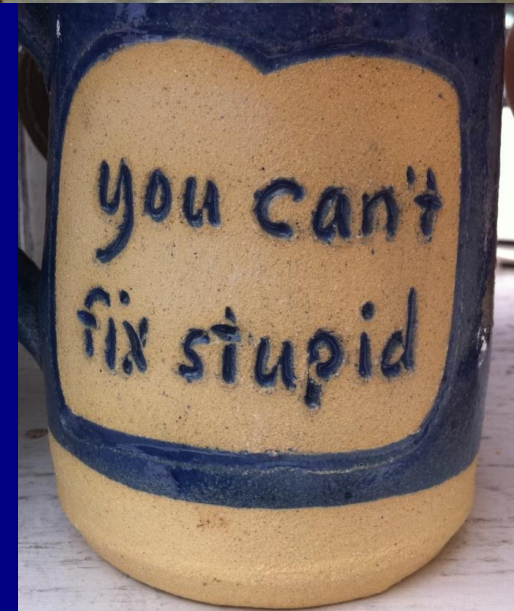
- INTRA-ARTICULAR CORTISONE UNDER FLUORO
  - WITH ARTHROGRAM TO CHECK CUFF
  - DOES LIDOCAINE ALTER THE PAIN (WORK COMP)
  - ALTER PT AND WORK REGIMEN





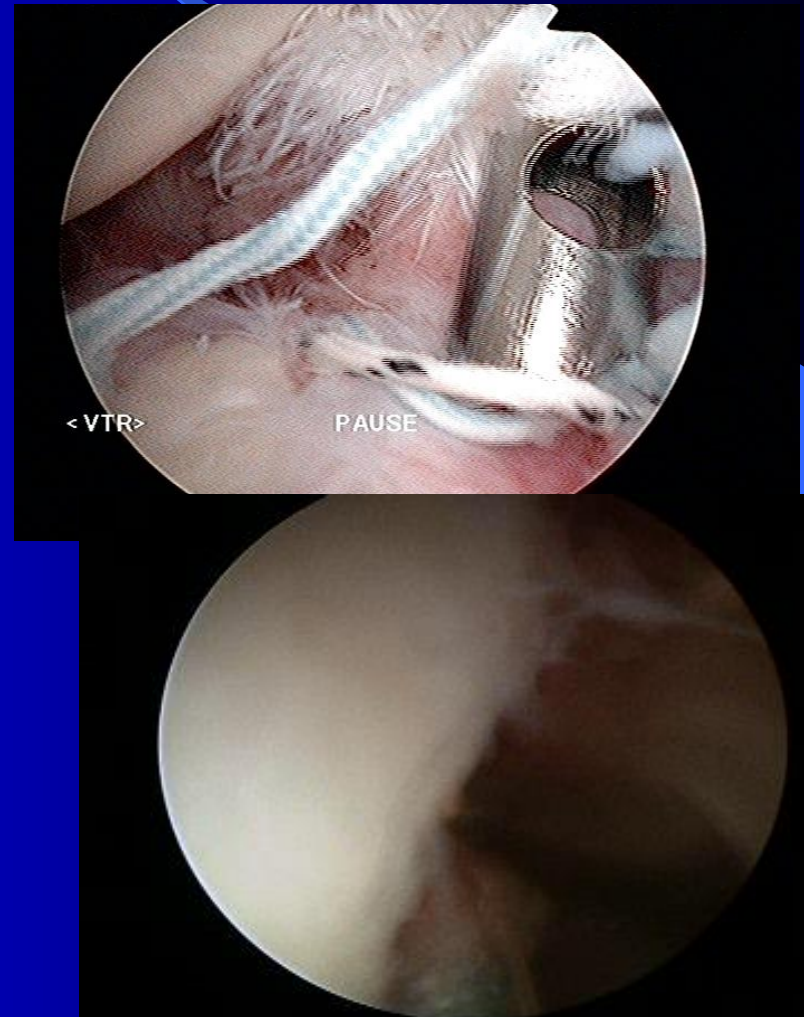
# SURGICAL OPTIONS

- GOALS, SAVE THE DELTOID
- DON'T MAKE A BAD SITUATION WORSE
- ARTHROSCOPIC APPROACH, AVOID OPEN IF POSSIBLE
- DO A CAREFUL EUA/MUA



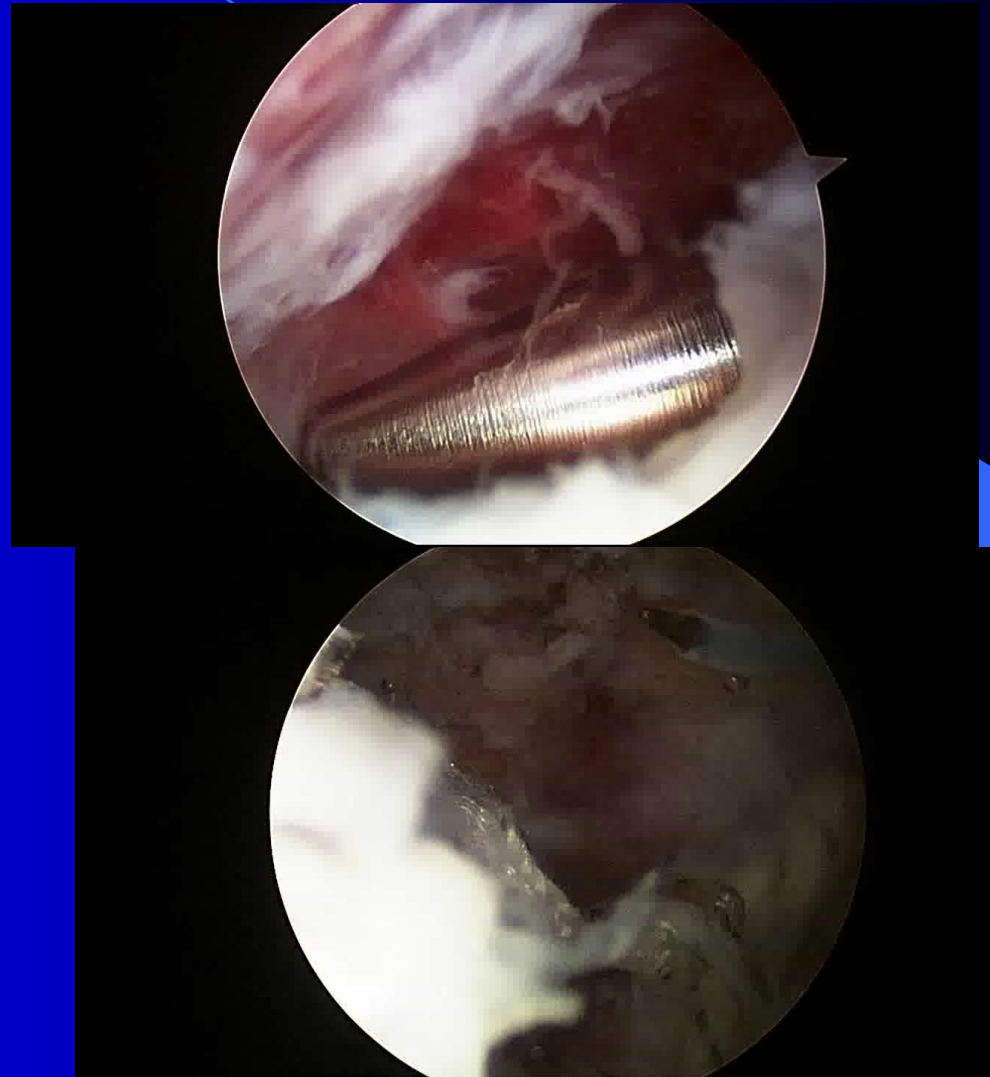
# GLENO-HUMERAL OPTIONS

- ARTHROSCOPY
  - REMOVE IMPLANT DEBRIS/KNOTS
  - RELEASE ADHESIONS IN CAPSULE
  - TENODESIS FOR BICEPS PATHOLOGY OR SLAPS



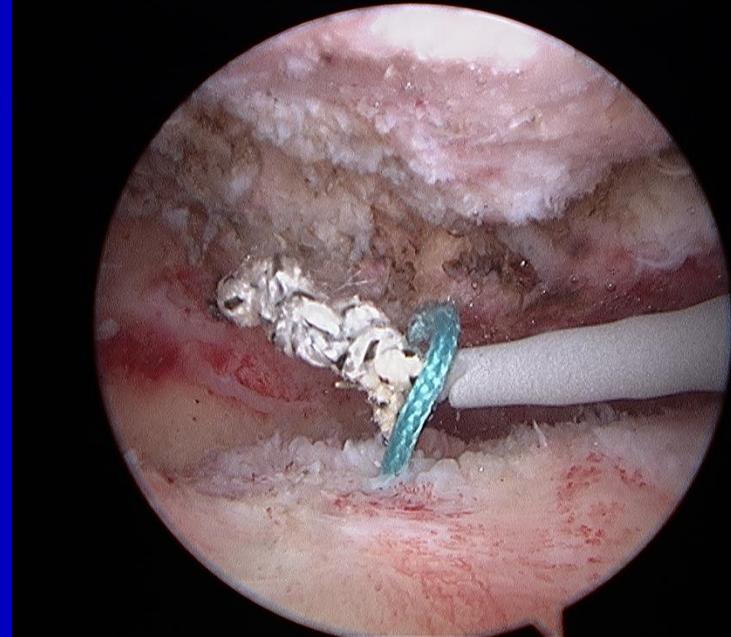
# SUBACROMIAL SPACE

- ENTRY CAN BE TOUGH AS CUFF SCARS TO ACROMION
- PEEL CUFF OFF ACROMION
- TRIANGULATE OFF MID ACROMION AND WORK FORWARD AS LANDMARKS ARE GONE



# SUBACROMIAL REVISION

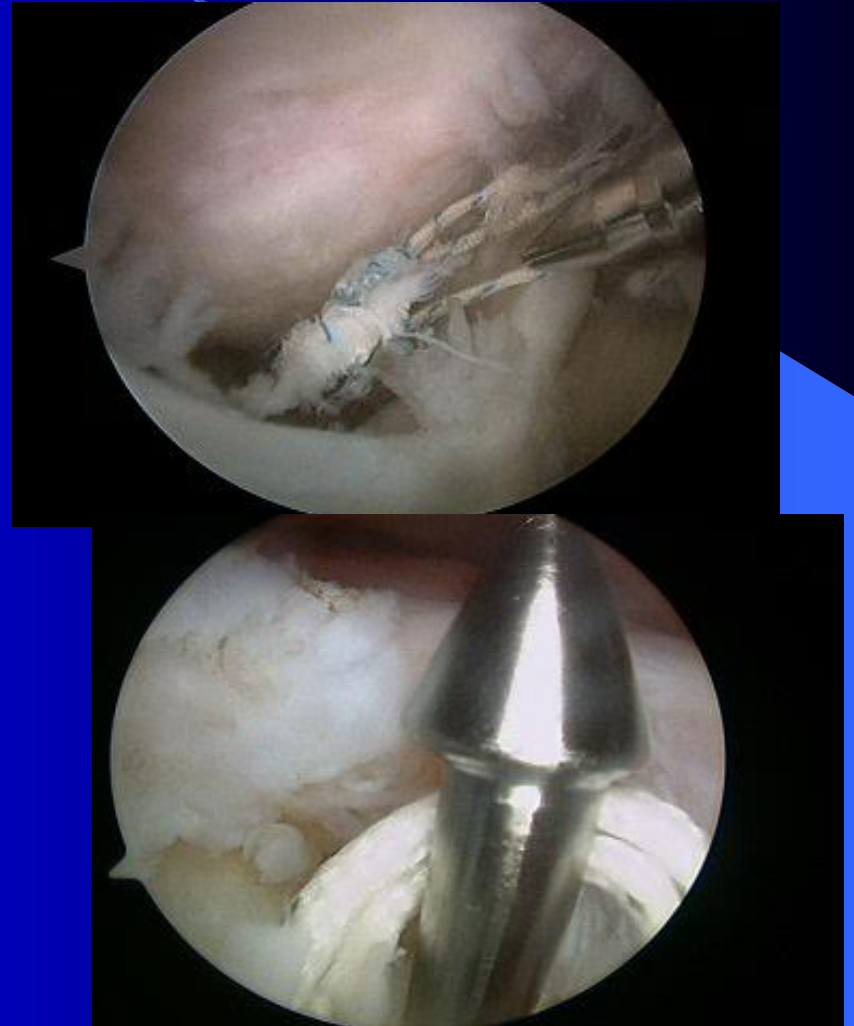
- REMOVE ALL PROMINENT KNOTS/LOOSE IMPLANTS
- REDO OR DO DECOMPRESSION IF NEEDED
  - CAREFUL OF FRACTURE





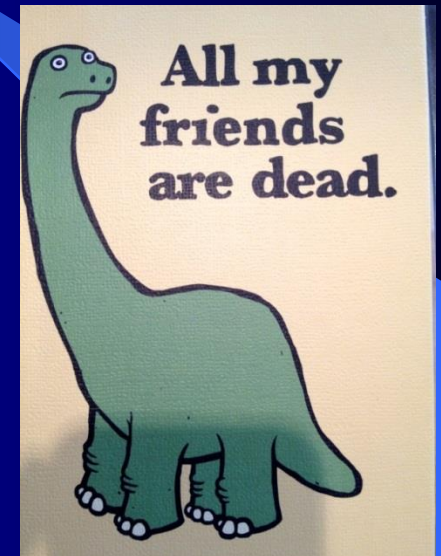
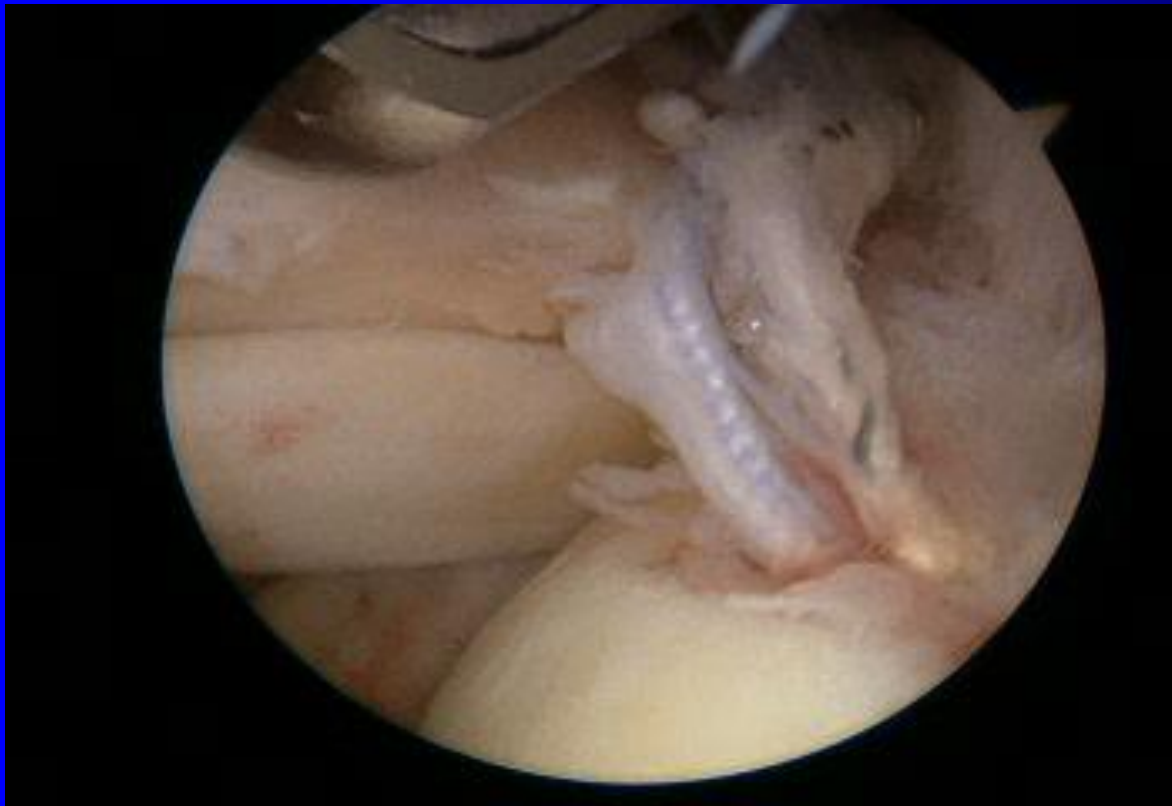
# EVALUATE CUFF

- ACCEPT PARTIAL TEARS OR ‘SCAR REPAIRS’
- REPAIR FULL THICKNESS RC TEARS
- ALTER ANCHORS
- MEDIALIZE REPAIR
- USE THE BICEPS
- ?TENDON TRANSFER
- ?REVERSE TSR

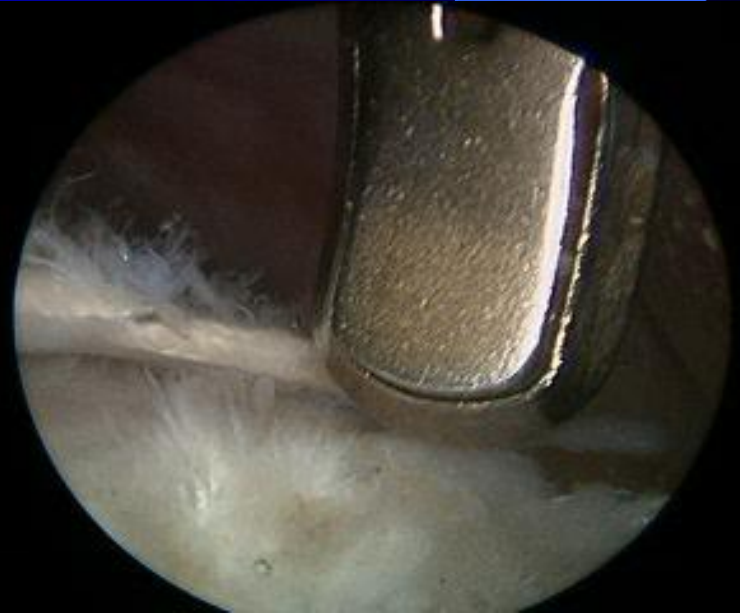
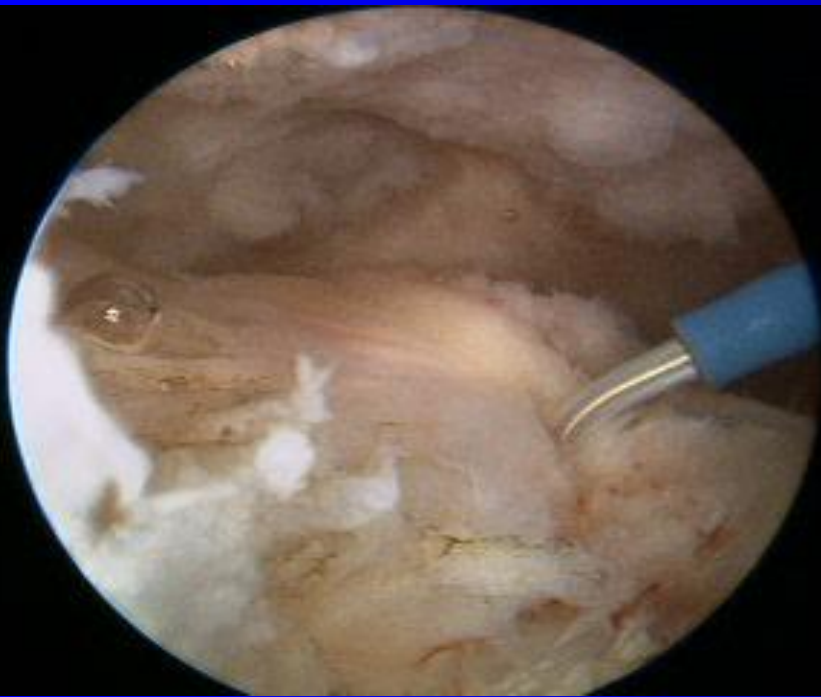


# REVISION RCR

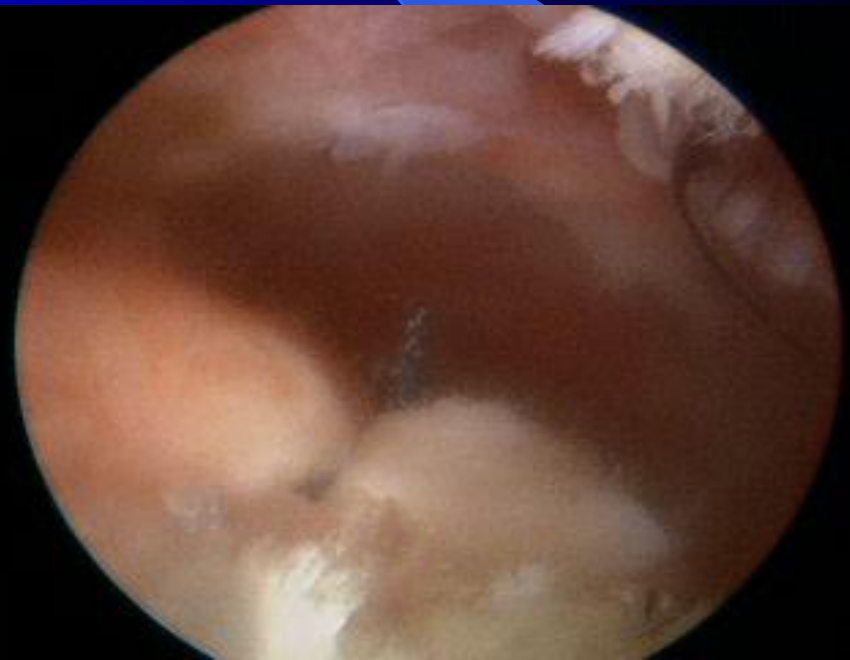
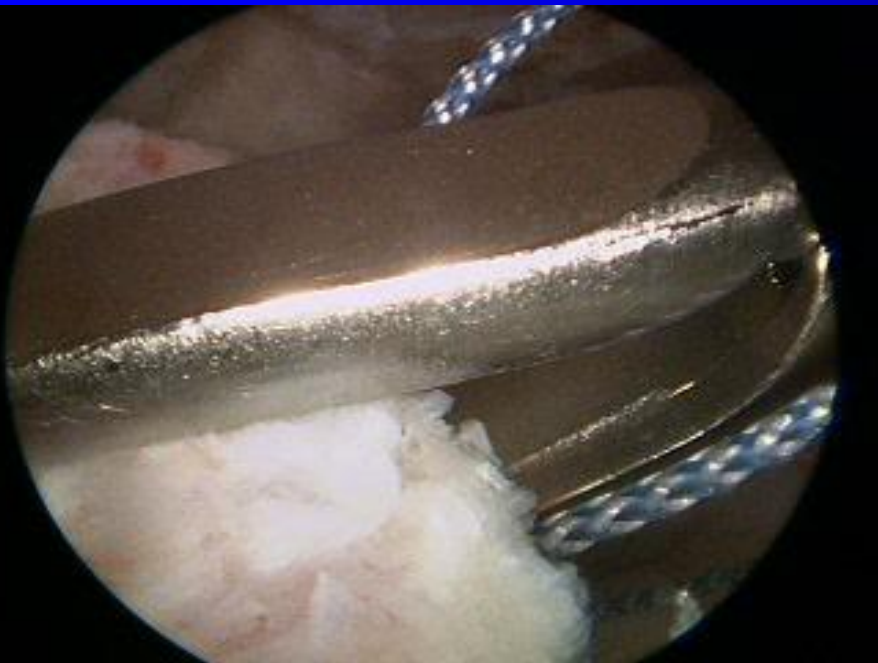
56 Y.O, 11 MOS S/P RCR  
C/O PAIN AND CLICKING



# REVISION RCR



# REVISION RCR

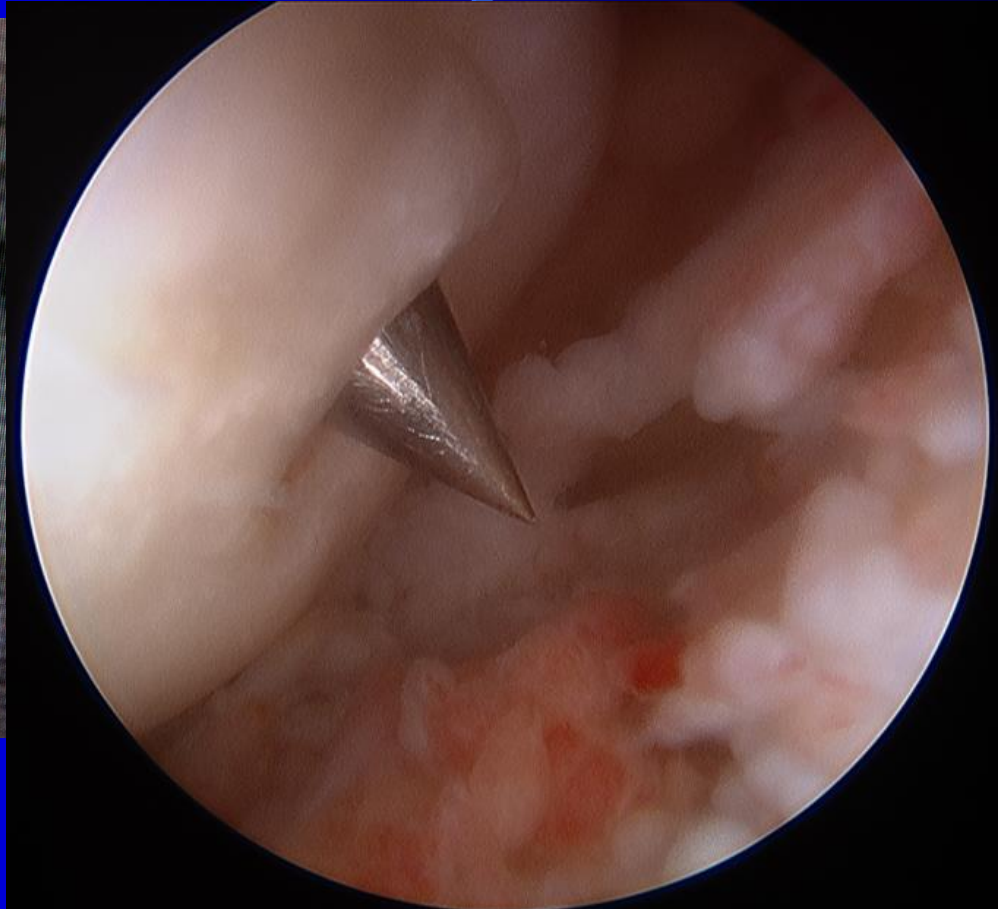




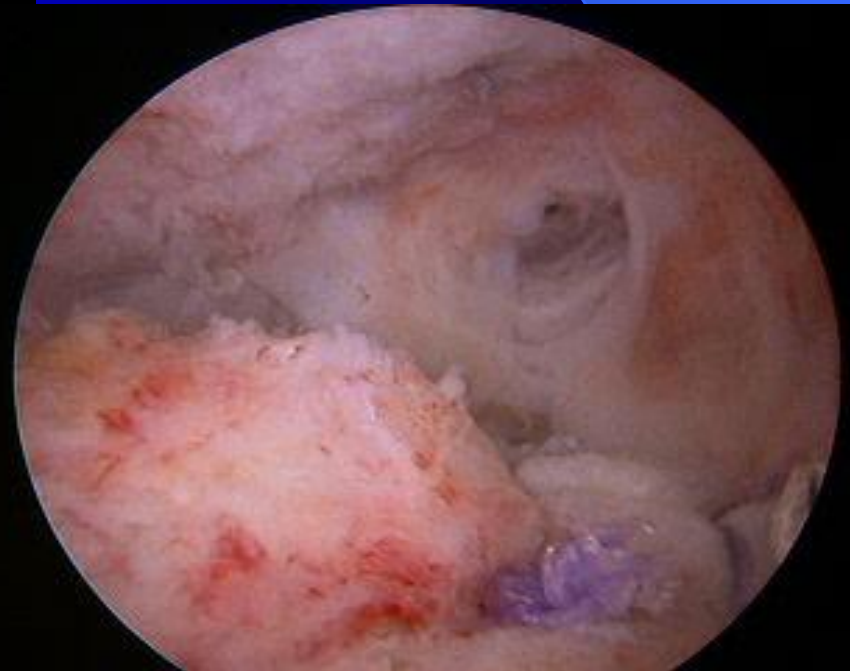
# REVISIONS

60 Y.O. TEACHER 18 MOS S/P RCR

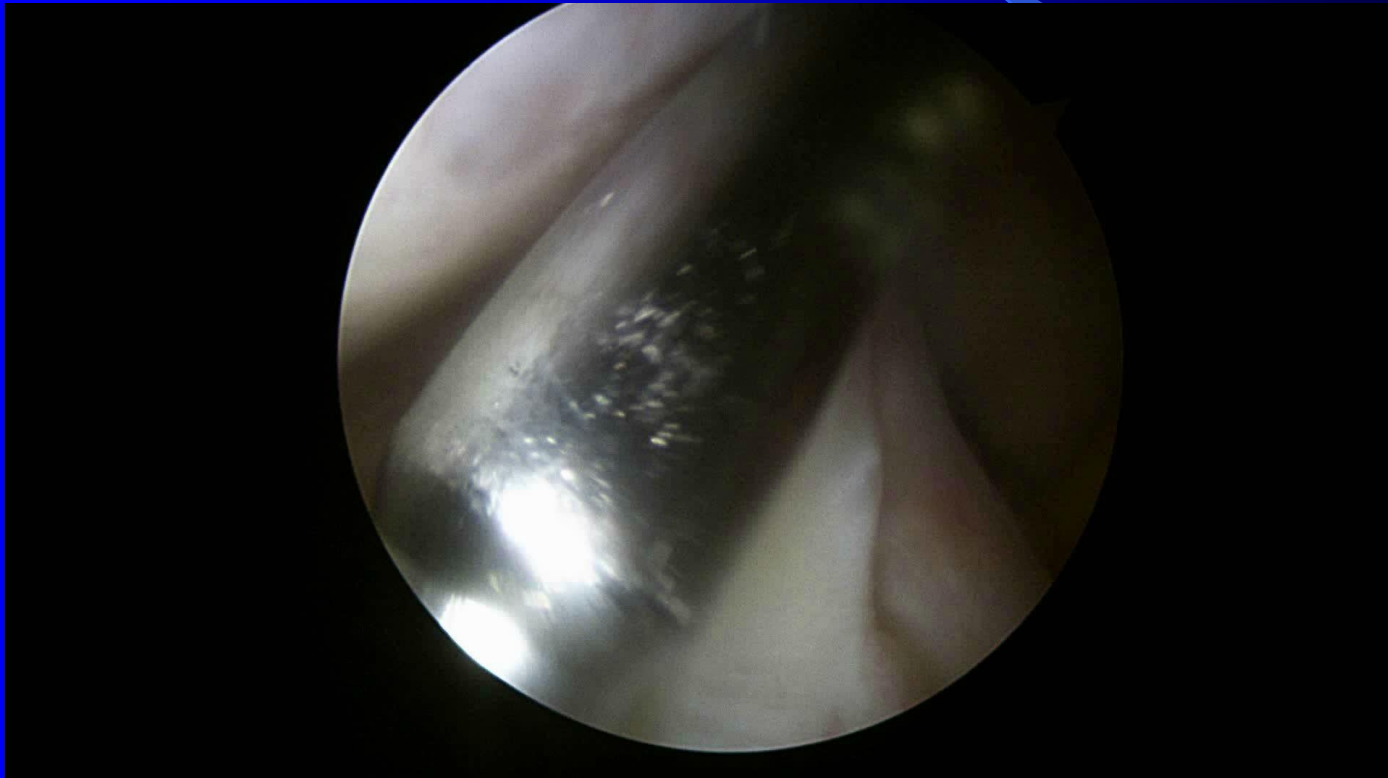
C/O DEEP PAIN, CLICKING AND PROGRESSIVE DEC. MOTION

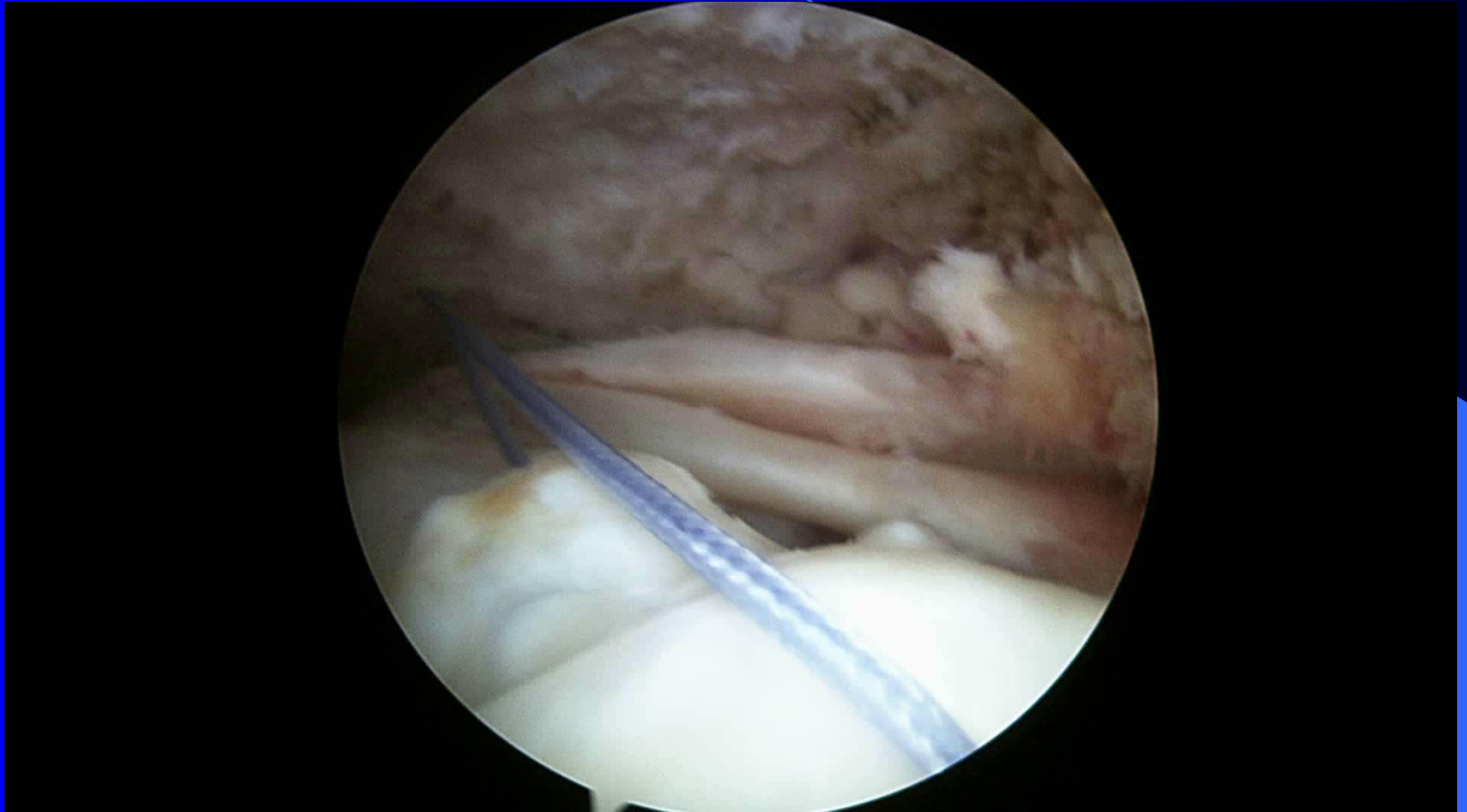


# REVISIONS

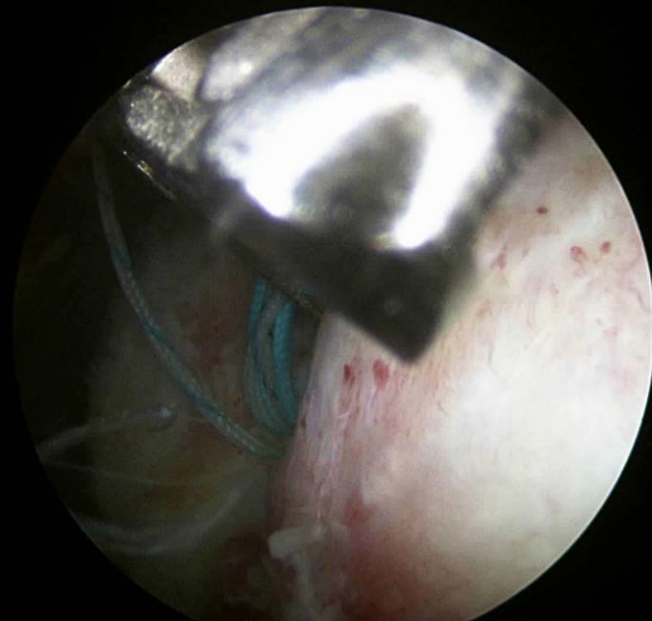


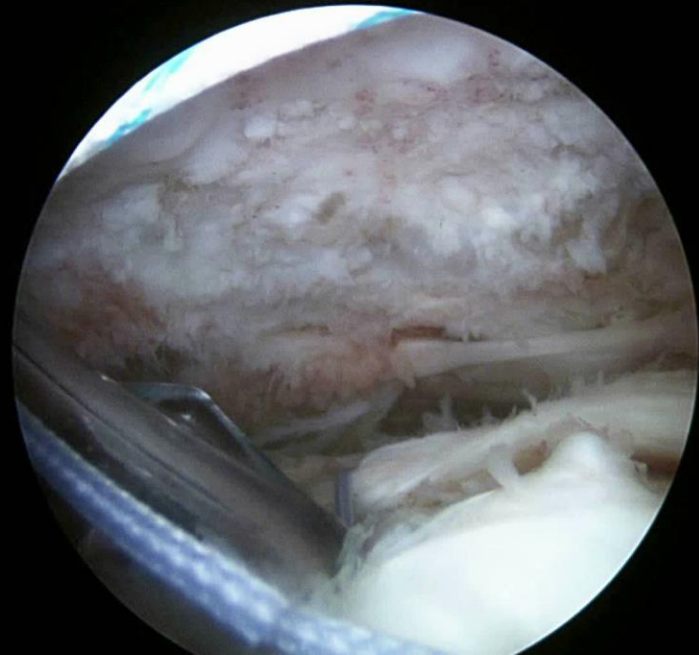
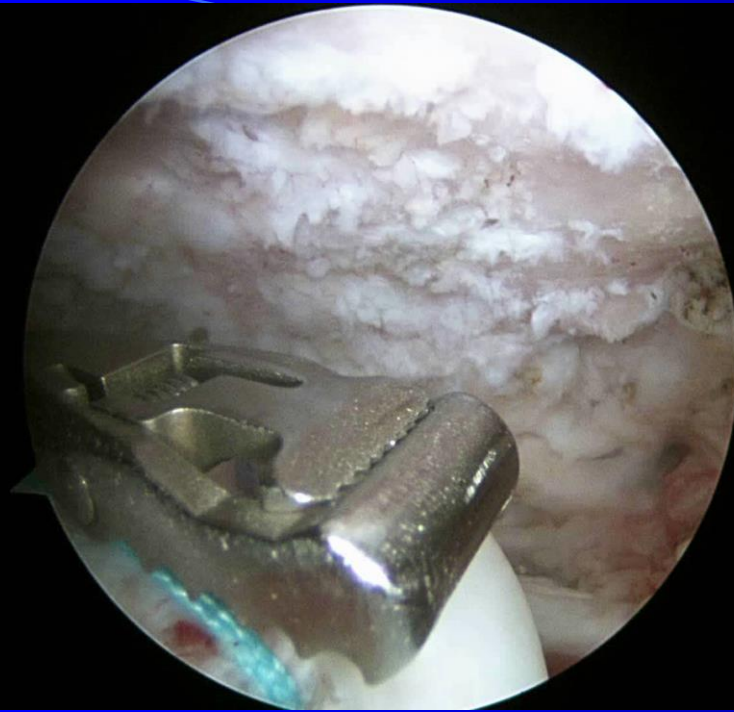
# REVISION CHALLENGE

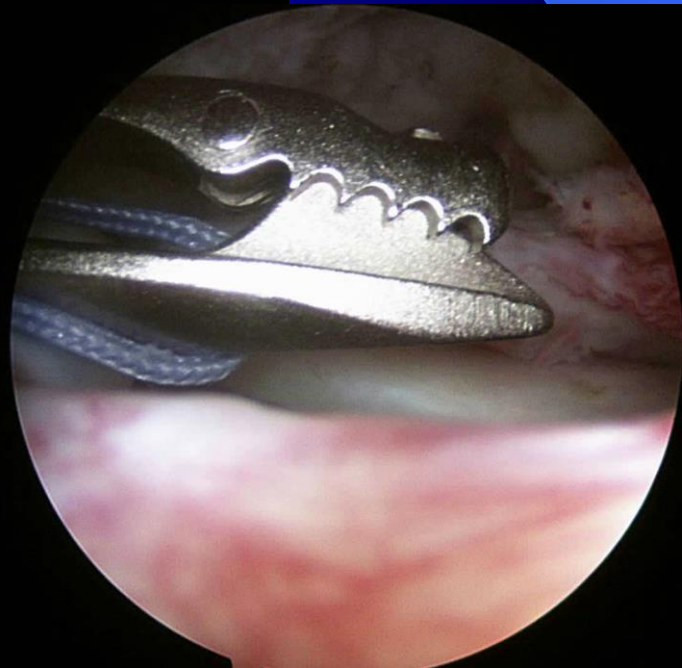
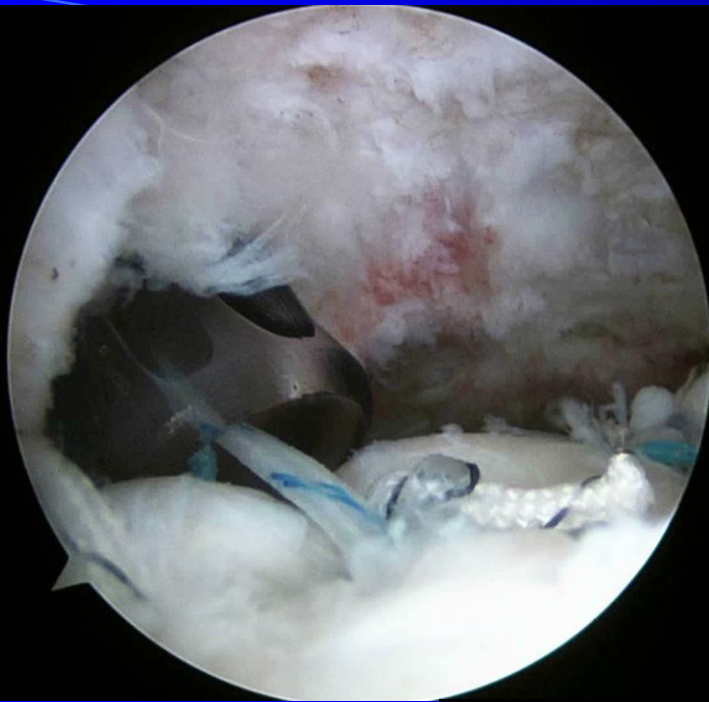


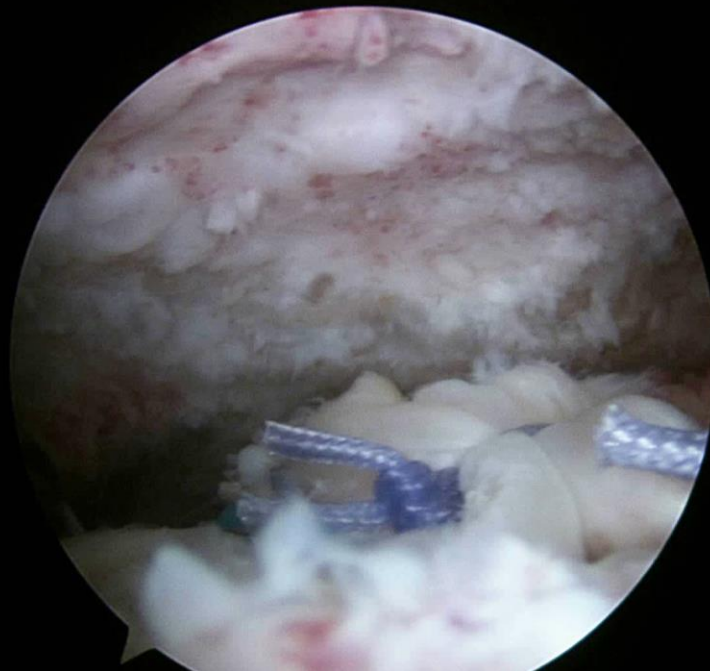
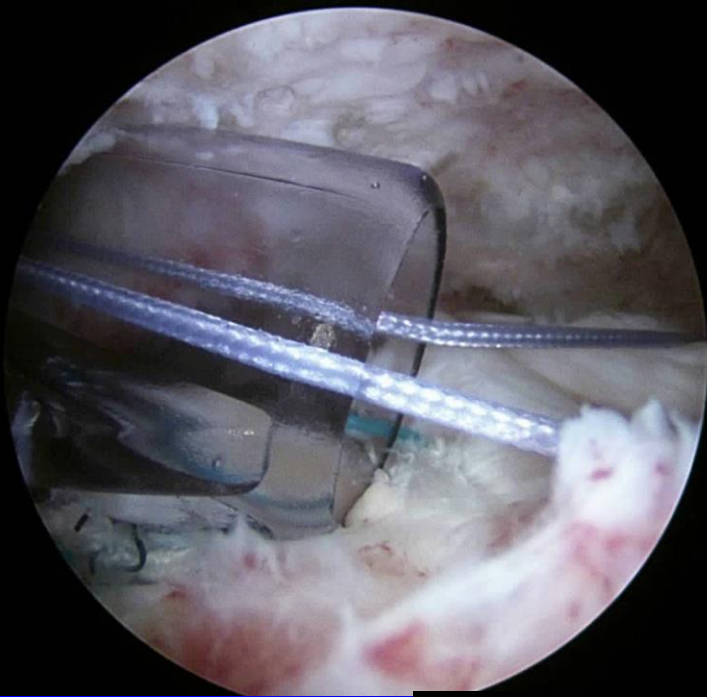














# SUMMARY POINTS

- TENSION IS THE ENEMY
- SOFT TISSUE CARE IS VITAL
- PRESERVE THE DELTOID
- ENHANCEMENT OF BIOLOGIC HEALING IS THE KEY



& P R P  
& STEM CELLS

# SUMMARY POINTS

- SECOND (OR MORE) TIME IN IS TOUGHER
- LEAST INVASIVE APPROACH
- **AVOID TREATING THE MRI REPORT!!!**
- LESS IS OFTEN BETTER
- FOCUS ON THE PATIENT'S NEEDS AND SPECIFIC FINDINGS
- STAY POSITIVE

