

Presented by:
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0:00 Introduction

1:33 Broken screw s/p Bristow procedure

3:47 Beware prominent hardware in the shoulder.
It breaks, erodes cartilage, etc. . .

5:13 Removing A Loose body From The Shoulder

6:53 Complications

- How I have managed my own complications
- If using new equipment, know how to get out of trouble
- Frustrating to break arthroscopic instruments
- Be patient!
- Be honest!

8:41 Sutures placed in rotator cuff, arthroscopically-aided with
Expressee; tip of needle broke off
Search for needle tip not successful
Embedded in thick rotator cuff

9:01 C-Arm View

9:52 Mini-open rotator cuff repair performed
C-Arm used to locate needle tip
Informed family of breakage of instrument
Post-op xrays taken in office

10:24 2 week Follow Up

12:31 Removal of A Loose Body

17:57 Thermal Capsular Modification

- I don't use
- Is not successful in MDI patient
- With improved suture-passing devices and anchors, tie instead
of fry
- Improved results in elite professional baseball athletes with
suturing has been reported (J. Andrews et. al.)

19:18 Thermal Shortening Video

19:46 Capsular Necrosis Video (Courtesy of Tony Romeo, M.D.)

20:46 Thermal Shrinkage of Bacon by Microwave

21:39 Thermal on cartilage kills cells
•Killing is BAD
•You may get away with it, but...

21:49 Charles Dickens Quote

----PART 1 FINISHED----

0:12 Physical Exam Video
•Weakness on RC testing 3/5
•Pain on exam
•Significant laxity
•A Greater than P

1:39 Arthroscopic Imaging of Patient

4:43 After Results

6:00 Thank You!

----PART 2 FINISHED----

0:35 Case 1 Chronic SLAP & Anterior Instability
•24 YO Right hand dominant high school pitcher, boxer
•History of 30 times shoulder slipping out of place in overhead positions
•PE: anterior apprehension, labral click, pain and weakness in maximum rotation, arm 90 deg. abducted

1:13 Bucket handle tear, labrum Video

2:22 Scope posterior Video

3:22 Anterior-inferior glenoid preparation, labral debridement Video

4:30 Removal unstable SLAP tissue Video

5:19 Mobilization of anterior-inferior capsuloligamentous complex, labral debridement Video

6:33 Osseous raptor x3, 6 sutures Video

7:57 Post-repair, arthroscope posterior Video

8:56 Arthroscope anterior, debridement degenerative non-repairable

posterior labrum Video

9:15 Arthroscope anterior Video

9:44 Scope anterior-superior portal, bumper stability re-established Video

10:40 Subscapularis bursa, common location of loose bodies Scope anterior-superior Video

11:17 Case 2 Subscapularis Tear & Anterior Instability

- 49 YO Right-hand dominant white female, homemaker
- Right shoulder injury swinging basket full of clothes

overhead

- PE: Significant limitation of motion
- Anterior apprehension
- Positive O'Brien's test
- Weakness, ER Greater than IR

12:07 Scope posterior Video

13:03 Sublabral hole Video

14:16 Biceps normal, 10% upper subscapularis tear Scope posterior Video

14:56 Scope posterior Anterior-superior and anterior portals Video

15:39 SLAP labral repair, anchors x2, mattress sutures Video

16:20 Scope posterior, s/p subscap debridement Video

16:52 CONCLUSIONS

- Practice makes better, never perfect
- Practice, practice arthroscopy in the wet lab
- Practice, practice knot-tying
- Be ready to face complications in surgery

----PART 3 FINISHED----

0:55 Subscapularis Muscle

1:42 Subscapularis Tears

- Lift Off (75% tear 5-30)
- Hand or back Lspine
- Maximum LR
- Napoleon (50% tear)
- Press belly, flexes wrist
- Bear Hug (Upper tear, most sensitive)
- Hand on opposite shoulder
- Elbow forward

- Examiner pulls hand off shoulder

2:51 Subscapularis & Biceps Instability Video

5:51 Subscapularis Footprint

- 2.5 cm superior-to-inferior
- 1.5 cm medial-to-lateral
- Widest superiorly

6:23 Initial Clinic Visit

- 46 year-old right-hand dominant male fell onto an outstretched right arm after tripping over his dog.
- Felt a ripping sensation in his shoulder
- Went to the emergency room, plain x-rays normal
- PE next day:
- Pain diffusely anterior shoulder
- Weakness, IR Greater than ER

6:47 Clinical exam: subscapularis tear

"I was unable to get my wallet out of my back pocket"

8:04 Operation Video

10:08 Synovitis, partial subscap tear, normal biceps tendon

Don't miss subscapularis tears; can be difficult to see at footprint/insertion

10:43 Biceps Tendon

- Often associated with:
- Subscapularis tear
- Chronic rotator cuff tears
- Presentation
- Initial ecchymosis and pain, then feel better
- Treatment
- Repair other associated tears
- Tenodesis vs. tenotomy

11:36 MRI Scans of the Shoulder

- Make sure you know the type scanner and radiologist
- Communicate with radiologist regarding your clinical diagnosis
- If you can't read the MRI scan, you shouldn't be ordering it

12:41 MRI Scans

- I have never seen a normal reading
- It's a slippery slope to treat based on radiologists' reading

13:41 What An MRI Scan Means To Me

14:29 CONCLUSIONS

- Practice makes better, never perfect
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14:48 The End. . . Thank You!