

# **Arthroscopic Suture capsulorrhaphy(Bankart repair) in TUBS**

**- Various methods -**

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## **1. Introduction**

- 1)Turkel et al : IGHLC - primary restraint for shoulder stability
- 2)Bankart lesions : avulsion of anterior glenohumeral-labral complex from  
anterior glenoid rim at scapular neck associated with  
excessive anterior inferior capsular laxity  
"Bankart lesion and capsular laxity"
- 3)In arthroscopic suture, simultaneous correction of Bankart lesion and  
excessive anterior inferior capsular laxity.

## **2. Surgical Technique**

- 1)Position
- 2)Arthroscopic evaluation
- 3)Preparation of anterior glenoid neck
- 4)Capsular shift
- 5)Repair of Bankart lesion

## **3. Complication and pitfalls**

- \* Inappropriately medializing the repaired tissue
- \* Loss of superior shift

## **4. Variation of pathology**

- \* Rhee's classification of Bankart lesion and modified suture technique according to classification
- \* Large Hill-Sachs lesion
- \* Small glenoid rim
- \* A.L.P.S.A. lesion

## **5. Results**

- \* Indication and patient selection for various technique is the most important factor for favorable result
- \* Authors : 40 patients of TUBS Arthroscopic transglenoid suture capsulorrhaphy(various technique) ----2 subluxation recur in 2 cases

## **VII. Other Arthroscopic Methods of treatment**

### **A. Staple Capsulorrhaphy**

1. Matthew (Arthroscopy, 1988)
  - a. 25 cases with 16% recurrence
  - b. 22/25 labral lesions
2. Hawkins (Arthroscopy, 1989)
  - a. 50 cases with 16% recurrence
  - b. Only 2/3 traumatic etiology
3. Complications
  - a. The highest complication rate (5.3%) of any arthroscopic procedure (reported by committee on Complications of AANA, Neal Small)
  - b. Staple migration
    - i) Sachs reported (AAOS, 1992) silent staple loosening in patients doing well clinically
    - ii) need to xray these patients forever
    - iii) can cause DJD if in joint

### **B. Bio-degradable Tack**

1. Russ Warren's experience
  - a. short lasting tack (polyglycolide)
  - b. retains only 10 % strength at 3-4 weeks
  - c. Speer, ASES New Orleans, 1994
    - i) 52 patients with anterior instability
    - ii) 21% failure rate
    - iii) No complications
  - d. Laurencin, AAOSM, Palm Desert, 1994
    - i) 20 patients with optimal indications
    - ii) all had traumatic anterior instability with a Bankart lesion and good ligaments
    - iii) recurrence rate 5%

### **C. Arthroscopic Bankart Repair (Suture tied posteriorly)**

1. Morgan (Arthroscopy, 1987)
  - a. 29 cases with no failures
  - b. all had bankart lesions
  - c. no complications
  - d. later reported at ASES Meeting on larger series with 2-5 year follow up with recurrence rate of 5%
2. Grana (AJSM, 1993)
  - a. 27 cases with 44% recurrence
  - b. all had a Bankart lesion

3. Savoie, ASES New Orleans, 1994
    - a. 161 patients with traumatic anterior instability
    - b. 9% failure rate
  
  4. Mologne, ASES New Orleans, 1994
    - a. 48 patients with traumatic anterior instability
    - b. active military population
    - c. 39% failure rate
    - d. 3 cases of suprascapular nerve palsy
- D. Arthroscopic Bankart repair (Suture tied anteriorly)
- Milek II anchor (Wolf)
  - Tag suture anchor
  - Revo mini bone anchor (Snyder)
  - Fastak suture anchor, with special instrument
- : more secure tie, but limited indication  
no capsular shift

## VIII. CONCLUSION

The role of arthroscopic procedures in the management of glenohumeral instability continues to evolve. Arthroscopic transglenoid suture capsulorrhaphy, as described, is an attractive and to evolve alternative for correcting the pathology of anterior and anteroinferior recurrent shoulder instability. The procedure is technically demanding. To achieve predictable results, recognition of and addressing the responsible pathology is essential, as is appropriate patient selection. Currentiy Suture tied on Anterior aspect has been innovated with special bone anchors and Instrument, But technically demanding procedure I limited indication.

**"Technically feasible safe reliable"**

**"Reproducable excell result"**

**"Predictable"**