

My Approach to Open vs. Arthroscopic Rotator Cuff Repair

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Arthroscopic Mindset

“Arthroscopic Equivalent”

“I can resect(repair) – the meniscus(rotator cuff) – faster by an open incision…”

Why repair rotator cuff tears?

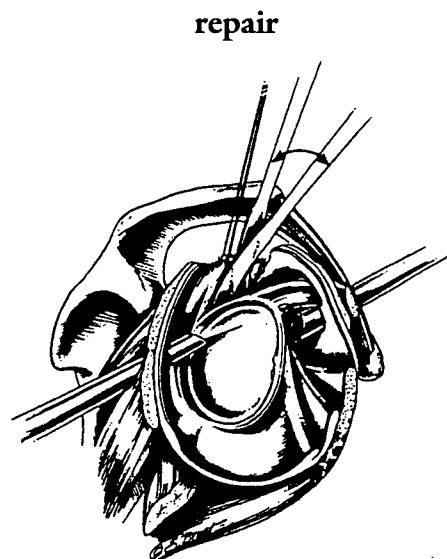
1. Individuals with a successful repair of a complete rotator cuff tear do better than those without a repair.
2. Repairs of extensive partial thickness tears are better than non repairs.

Cuff Repair Steps(Open or Arthroscopic)

1. GH Dx arthroscopy
2. Mobilize cuff
3. Acromioplasty
4. Prepare bone for cuff
5. Evaluate cuff tear
6. Side-side cuff suture
7. Fixation to bone
8. Rehabilitation

1. GH Diagnostic Arthroscopy
Do in all cases
Systematic examination
Debride cuff, biceps, etc
Repair SLAP

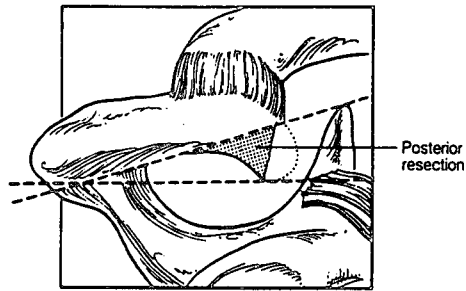
2. Mobilize cuff
See from artucular side
Grasp free edge



2. Release the capsule with an elevator while applying traction to the cuff.

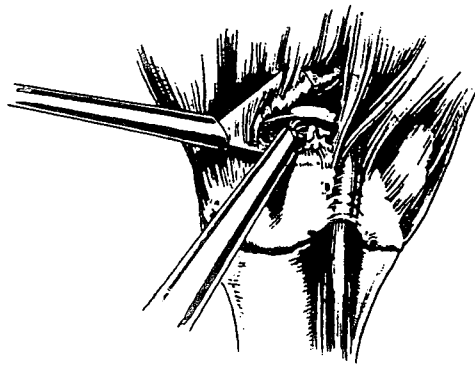
Grasper
 Suture punch
 Capsular release
 "Liberator" elevator
 Banana blade

3. Acromioplasty
 bursectomy
 Remove anterior spur
 Make acromion flat
 AC resection prn
 Do it in 10~15 minutes



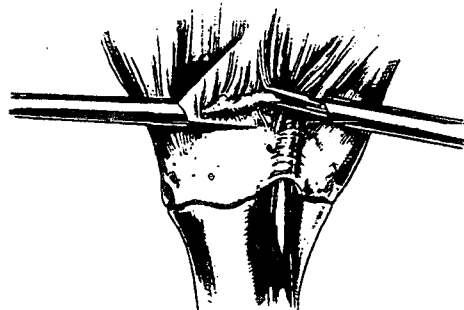
3. Acromioplasty

4. Prepare bone for cuff repair
 Burr at articular margin
 Just the surface



4. Decorticate the bone at the articular margin with a small burr.

5. Evaluate cuff tear
 Separate cuff from bursa
 Size
 Mobility
 Shape (V.L. ...)
 Decision for repair
 Arthroscopic
 "Mini-open"



5. Grasp the cuff to evaluate the mobility and ease of repair.

6. Side-side cuff suture

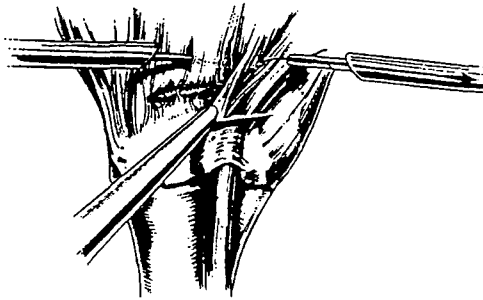
Permanent, Absorbable

Pass suture

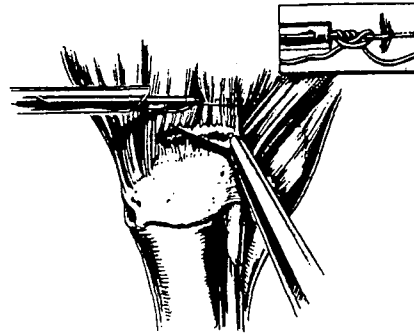
Suture needles & shuttles

Suture retrievers and grasping needles

Needs better tools



6A. A suture passer places a monofilament suture through the cuff tear.



6B. A sliding knot secures the repair.

7. Fixation to bone

Drill holes

Anchors

Fix to bone

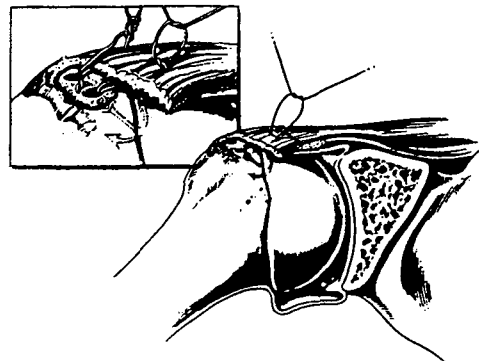
45 degrees to "pull"

Pass suture through cuff

Before or after anchor

Tie a knot

Slip or square



7. Secure the cuff to bone with a suture anchor.

8. Rehabilitation

Same as open surgery
Use STK (Shoulder Therapy Kit)

Difficulties

Tear too big and immobile
Can't pass sutures
Can't pass anchors
Bone too osteoporotic
Takes too much time

Teamwork

Competent assistant
Capable scrub
Prepared surgeon

Learning

Practice knots
Visualize procedure
Practice on models
Side-side repair is easiest
Less than 1cm is easier
See whole tear at once
Bail out prn

Tools

3~4 cannulas
1~2 of 8mm diameter
Suture passers
Suture retrievers
Anchors
Knot tying instruments

Conclusion

Can do repair open or arthroscopic
Side-side repair is easiest
Become easier with practice
Rehabilitation is the same
Is the future