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SURGICAL TREATMENT OF ISOLATED SUBSCAPULARIS RUPTURE

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From 1980 to 1997, eleven cases of isolated full thickness tears of the subscapularis tendon underwent repair. There were eight male and three female patients with an average age of 62 years (range, 25 to 80 years). Ten patients suffered significant trauma resulting in three dislocations, two of which had a concomitant axillary nerve palsy. One patient, a competitive Masters swimmer, sustained an atraumatic rupture. Follow-up averaged 51 months. Ten patients (91%) had excellent or satisfactory results. Despite good clinical results, only 73% converted to a normal lift off while 82% had a normal stomach press.

Subscapularis tendon rupture should be suspected in patients with an abnormal lift-off or stomach press test or those unable to elevate their arm following anterior shoulder dislocation. Patients with a combined lesion of a subscapularis tendon rupture and anterior shoulder dislocation may be at increased risk of having an axillary nerve injury. Tendon repair leads to satisfactory functional results in the majority of cases even though a third of the patients did not regain terminal internal rotation strength.