

COMBINED BANKART AND BRISTOW PROCEDURE FOR ANTERIOR INSTABILITY

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Introduction: Purpose of this study is to report the results of combined Bankart and Bristow procedure for anterior instability of the athletes in contact sports.

Materials and Methods: From 1989, 179 shoulders of 171 patients with recurrent subluxation and dislocation of the shoulder were treated in our clinic. Among them, a combined Bankart and Bristow procedures for 47 athletes were performed. All of 47 patients were males. 17 ice hockey players, 7 football players 4 amateur wrestlers and the other 13 sports athletes were involved. The ages of the patients at surgery ranged from 18 to 32 with an average of 23.4 years old. The surgical technique of the combined Bankart and Bristow procedure started to make T-shape cut on the subscapularis tendon. Then, the capsule was incised by reversed T-shape. The coracoid process with conjoined tendons was transferred to the glenoid. Finally, the capsule was re-attached to the glenoid rim with two or three anchors. Results were evaluated by the Shoulder Sports Score - JSS shoulder sports score. 50 points were assigned to activity, 30 points to pain and 10 points to muscle strength, range of motion and assessment, respectively. Follow-up period ranged from 24 month to 9 years.

Results: An Average of JOA shoulder sports score increased from 60 to 99 with satisfactory results of all the patients. No re-dislocation and subluxation occurred for this follow-up period. The restriction of external rotation at 0 degrees abduction ranged from 0 degree to 10 degrees (average: 5.7). The average restriction of external rotation at 90 degrees of abduction was 4.5 degrees.

All the patients returned to their original sports. Isokinetic strength of internal and external rotation of the affected side showed very good recovery compared with contra-lateral side with no statistical difference.

Conclusions: The results of the combined Bankart and Bristow procedure for the competitive athletes showed excellent results.

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