

## Arthroscopic three-point double-row repair for acute large bony Bankart lesions

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### Purpose

We evaluated clinical outcome of novel arthroscopic osseous fixation technique for the treatment of acute large bony Bankart lesions.

### Patients and methods

Between Dec 2006 and Dec 2007, there were six anteroinferior osseous Bankart lesions that had been treated surgically with suture anchors under arthroscopy using novel technique. The mean patient age was 34 (19–42) years. Bony Bankart lesions were operated on at less than 1 month after the first dislocation. Our indications for arthroscopic repair in these patients were acute displaced large bony Bankart lesion with step formation of more than 2 mm at the articular glenoid surface, and absence of associated lesions. All shoulders were evaluated preoperatively with MDCT.

### Results

Follow-up ranged from 11 to 17 months. Postoperative assessment by the surgical team was based on a Rowe score, a tool devised specifically to evaluate shoulder instability. The mean Rowe score was 94.7 (range, 87–100). There were no complications, such as persistent shoulder pain, recurrence of dislocation, range of motion (ROM) limitation of the shoulder, or postoperative infection.

### Conclusion

Our technique confers effective, firm fixation of the bony Bankart lesion by three-point fixation without the suture material crossing the glenoid cavity.

**Key Words:** Bony Bankart lesion, Suture anchor