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## **Glenohumeral joint arthritis after Latarjet procedure: Risk factors and clinical significance**

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**Introduction:** Instability in the shoulder frequently affects young patients of working age and can notably limit the quality of life (1-4). The surgical treatment for stabilization aims to return the patient to a stable ROM without pain (38,39). A decrease in external rotation, in comparison to the contralateral, is often observed. This can be further complicated by the onset of arthritis in the modified biomechanics of the shoulder (5-9).

**Materials and methods:** For this retrospective study, the researchers contacted patients who had undergone surgery for anteroinferior instability of the shoulder with the Latarjet technique in Jordan from 2007 to 2017, thereby ensuring a follow-up of at least 1 year. Within this cohort, 81 patients were identified. The researchers aimed to check all 81 operated patients. The patients were clinically checked using two separate protocols (Constant score UCLA score). In all cases, both patients' shoulders were radiographed in anteroposterior (AP) projection, for the evaluation of possible arthritis and axial projection of the operated shoulder, as well as to localize the position of the transposed coracoids and its consolidation. To compare the shoulder operated on with the non-operated; the presence of arthritis was studied through these radiographs of each patient's two shoulders and classified according to the criteria of Samson (60) which distinguishes arthritis in three degrees.

**Results:** All patients in the study were analyzed using the two protocols of evaluation: UCLA and Constant. Using the UCLA score, the average of the results was 33.6, with one score of 25 and 21 results of 35. The remaining 14 patients all recorded a score above 27.

Using the Constant method, the average of the results was 93.9, with one result of 68 and 11 results of 100 excellent. 18 patients recorded a good score, 5 had a good result, and 1 had a 'fair' result. The data analysis showed statistically significant values are found when the arthritis is associated with: the age at which the control is submitted for intervention. Position of the graft., Type of lesion present, and Time between the first episode and the intervention.

**Conclusions:** The indications for the use of the Latarjet technique in case of unidirectional instability with Bankart lesions are limited. However, in the researcher's experience, this technique has also been used for patients presenting a unidirectional traumatic instability with joint laxity, even in the absence of bony Bankart, without any difference in results between the two groups of patients. All the patients that participated in this study are satisfied with the intervention, as they have not felt limited in their daily actions; this also applies in cases where the ROM was reduced in either internal rotation or external rotation. The researchers feel confident it is not the Latarjet technique that favors the onset of arthritis, but instability and improper use of the technique.

### **Recent Publications**

1. Trigg SD. Total elbow arthroplasty: current concepts. *Northeast Florida Medicine*. 2006; 57: 37-40

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2. Morrey BF, An KN, Chao EYS. Functional evaluation of the elbow. *The Elbow and its Disorders*. Philadelphia, PA: WB Saunders. 1993; 86-97
3. Apolone G, Mosconi P. The Italian SF-36 Health Survey: translation, validation, and forming. *J Clin Epidemiol* 1998; 51(11): 1025-1036

**Biography**

Ala Almaitah Shoulder and Knee Soft Tissue Surgery Fellow. Orthopedics and Trauma Specialist. Specialist in Orthopedic Traumatology. He is from Jordan Country

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