Return-to-Play following Latarjet Procedure in Young Contact Athletes

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INTRODUCTION: Young athletes that play a contact sport are susceptible to anterior glenohumeral instability due to high-velocity impacts and repetitive dislocations. Few studies have examined return-to-play and patient outcomes following Latarjet procedure in this patient population.

METHODS: Sixty-seven consecutive contact athletes (71 shoulders), age ≤35, that underwent Latarjet procedure for recurrent shoulder instability between 1/1/2018 and 3/31/2021 were retrospectively identified. Demographic information, medical history, surgical history, number of dislocations prior to surgery, and postoperative complications up to 6 months after surgery were reviewed. Forty-two patients were interviewed with minimum follow up of 12 months. Outcomes evaluated include return to play, competition level, patient satisfaction, and patient-reported outcomes including American Shoulder and Elbow Surgeons (ASES) Score, Disabilities of the Arm, Shoulder, and Hand (DASH) Score, and Visual Analog Scale (VAS).

RESULTS: Mean age at time of surgery for the total cohort was 19.7 years. 19/67 (28.3%) of patients had prior shoulder surgery, most commonly arthroscopic stabilization. On average, patients had 24.2 frank dislocations (SD 39.1) prior to undergoing Latarjet procedure. Eight of 67 (11.9%) of patients experienced unresolved pain or stiffness six months after surgery and 2/67 (2.9%) required reoperation after Latarjet. Only one patient experienced hardware failure. Forty-two patients (63%) were interviewed with mean follow up of 26.7 months (Table I), of which 20 played football. In total, 14/42 (33%) athletes competed at the collegiate level, and 23/42 (55%) at the high school level at the time of surgery. Thirty-three of 42 patients (78.6%) returned to sport, of which 29/33 (88%) returned to playing at the same competition level; 12/20 (60%) of football players returned to sport. Three of 42 (7%) reported recurrent dislocation. Mean ASES score was 91.7, DASH score 6.1, and visual analog scale 4. A total of 39/42 (93%) patients reported improvement in quality of life after undergoing Latarjet procedure for shoulder instability.

DISCUSSION AND CONCLUSION: The Latarjet procedure allows young contact athletes with shoulder instability to return to competitive play at strong rates. Although there is high patient satisfaction with the Latarjet procedure, recurrent instability and unresolved pain and stiffness are significant postoperative complications.

Table I. Descriptive data of sports played, competition level, return to play, and quality of life of patients interviewed following Latarjet procedure.

	Interviewed Patients (N=42)	
Sport(s) Played*		
Ice Hockey	5	12%
Football	22	52%
Basketball	14	33%
Skiing/Snowboarding	1	2%
Soccer	3	7%
Lacrosse	3	7%
Wrestling	12	29%
Other	17	40%
Competition level		
Professional	0	0%
Collegiate	14	33%
High School	23	55%
Recreational	5	12%
Return to Play		
Yes, returned to play	33	79%
Returned to play at the same level	29	-
No, did not return to play	9	21%
Due to*: *Restrictions placed by your surgeon*	0	-
Aged out of competition level	10	-
Fear of further injury	9	-
Shoulder apprehension or instability	2	-
Recurrent dislocation	1	-
Other	1	-
Post-operative Quality of Life		
Much improved	22	52%
Improved	13	31%
Slightly improved	4	10%
Unchanged	1	2%
Slightly worse	1	2%
Worse	0	0%
Much worse	1	2%

*Multiple options could be chosen by interviewees
Average follow-up 26.7 months

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