Clinical Outcomes of Arthroscopic Latarjet as a Revision Surgery after Failed Arthroscopic Bankart Repair: A Case-Control Study

Emilio Calvo, Lika Dzidzishvili[1], Claudio Calvo, Maria Valencia[2]
[1]Orthopaedic Surgery and Traumatology, Hospital Universitario Fundación Jiménez Díaz, [2]Hospital Universitario Fundación Jiménez Díaz

INTRODUCTION:
The role of arthroscopic Latarjet stabilization after failed arthroscopic Bankart repair has yet to be definitively established and merits further investigation.
The main purpose of the study was to compare clinical outcomes, recurrences, and complications of arthroscopic Latarjet revision procedure after failed arthroscopic Bankart repair versus arthroscopic Latarjet as a primary procedure.
METHODS:
Between 2009 and 2018, patients with diagnosis of anterior shoulder instability who underwent an arthroscopic Latarjet surgery were evaluated. Patients were separated in 2 groups depending on whether Latarjet was performed after a previous instability surgery (revision group 1) or as a primary surgery (control group 2). Rowe score, Western Ontario Shoulder Instability Index (WOSI), Constant-Murley Shoulder Outcome score (CMSO), and Single Assessment Numeric Evaluation (SANE) were assessed pre and postoperative with a minimum 24 months follow up. Pre and postoperative level of athletic activity, sport participation, dislocations, subluxations, and complications were assessed too.
RESULTS:
A total of 97 patients, with a mean age of 31.0 ± 8.81 years (range, 18-45) and a mean follow up of 38 months (range 24-48 months) met the inclusion criteria. No significant differences between groups were observed postoperatively in ROWE (group 1=91.4, group 2=94.1; p=0.223), WOSI (group 1=510, group 2=403; p=0.05), CMSO (group 1=90.7, group 2=94; p=0.105), and SANE (group 1=85.8, group 2=87.3;p=0.683).
Four (6.5%) postoperative dislocations were reported in group 1 and one (2.9%) in group 2 (P= 0.14). Patients in the revision group presented significantly lower return to previous level of sports activity (p=0.008). No clear reported impairments related to shoulder pain was observed among these patients; however, they addressed this limitation to the fear of re-injury. No significant decrease in overall athletic level was observed postoperatively between the groups (P= 0.02).
DISCUSSION AND CONCLUSION:
Arthroscopic Latarjet, after failed arthroscopic Bankart repair seems to provide similar clinical results to the arthroscopic Latarjet as a primary surgery. However, a decreased level of postoperative sports participation can be expected in patients with revision surgery.