Rotator Cuff Repair Failure With and Without Arthroscopic Acromioplasty: Analysis of a National Medicare Database

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INTRODUCTION:

The role of acromioplasty during rotator cuff repair (RCR) has evolved over time. Early principles resulting from Neer's theory of external impingement and the adoption of arthroscopic techniques led to a dramatic increase in the use of concomitant acromioplasty during RCR. However, more recent literature has debated the utility of acromioplasty during RCR. This investigation sought to use a large, nationwide database to compare the mid-term risk of RCR revision and any ipsilateral shoulder surgery on patients following an index RCR with or without acromioplasty. The authors hypothesized that acromioplasty would have no effect on the rates of RCR revision or subsequent surgery on the ipsilateral shoulder.

METHODS: The Medicare Standard Analytic File, which encompasses the entire Medicare billing and payment data, was queried between 2005-2014. Patients undergoing arthroscopic rotator cuff repair were identified and stratified based on whether ipsilateral acromioplasty was concurrently performed using Current Procedural Terminology codes. Groups were matched by age, gender, year of index procedure, and Elixhauser index at a 2:1 ratio. Primary endpoint was defined as undergoing a repeat ipsilateral shoulder surgery related to the rotator cuff at 5 years of follow up. Kaplan-Meier survival curves were constructed and the two groups were compared using the log-rank test.

RESULTS: After matching, 54,209 shoulders in the rotator cuff repair with acromioplasty group and 26,448 shoulders in the rotator cuff repair without acromioplasty group were identified. Shoulders undergoing concurrent acromioplasty at index rotator cuff repair had a significantly increased rate of repeat ipsilateral cuff repair at 5 years postoperatively (8.5% vs. 6.8%, p<0.001). Similarly, there was an increased rate of reoperation of all types to the ipsilateral shoulder in cases where concurrent acromioplasty was performed (9.6% vs. 9.1%, p<0.001).

DISCUSSION AND CONCLUSION: Using a large, national database, concurrent acromioplasty at the time of rotator cuff tear was found to be associated with both an increased rate of overall subsequent procedures and revision rotator cuff repair.

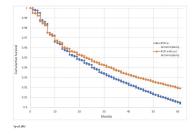


Figure 1. Kaplan-Meier curve depicting time to reoperation following arthroscopic rotator cuff repail procedure

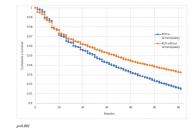


Figure 2. Kaplan-Meier curve depicting time to rotator cuff revision procedure (open and arthroscopic

		With Acromiophoty	No acromioplasty
CPT Code	Procedure Name	(N, %)	(N, %)
	Arthroscopy, shoulder, surgical; decompression of subacromial space with partial		
CPT-29826	acromioplasty with or without coracoacromial release	4323 (28.8)	977 (19.9)
	Arthrocopy, shoulder, diagnostic with or without synovial biopsy (separate		
CPT-29805	procedure)	43 (0.29)	26 (0.53)
CPT-29806	Arthroscopy, shoulder, surgical, capsulomhaphy	41 (0.27)	29 (0.99)
CPT-23907	Arthroscopy, shoulder, surgical, repair of SLAP lesion	221 (1.47)	36 (1.55)
CPT-29819	Arthroscopy, shoulder, surgicul, with removal of loose body or foreign body	221 (1.47)	108 (2.20)
CPT-29820	Arthroscopy, shoulder, surgical, synosectomy, partial	85 (0.57)	49 (1.00)
CPT-29821	Arthroscopy, shoulder, surgical, synosectomy, complete	74 (0.49)	25 (0.51)
CPT-29822	Arthroscopy, shoulder, surgicul; debridement, limited	907 (5.3%)	351 (7.16)
CPT-29823	Arthroscopy, shoulder, surgical; debridement, extensive	1084 (7.23)	376 (7.67)
	Arthroscopy, shoulder, surgical: distal classicalectomy including distal articular		
CPT-29824	surface (Mamford procedure)	1708 (11.38)	330 (6.73)
	Arthroscopy, shoulder, surgical; with lysis and resection of adhesions, with or		
CPT-29825	without manipulation	297 (1.98)	125 (2.55)
CPT-29827	Arthroscopy, shoulder, surgicul; with rotator cuff repair	4839 (323)	1750 (35.7)
CPT-29828	Arthroscopy shoulder biceps tenodesis	522 (3.48)	186 (3.79)
	Arthrophoty, glenchumeral joint; total shoulder (glenoid and proximal humeral		
CPT-23472	replacement (eg. total shoulder))	91 (0.61)	67 (1.37)
CPT-23412	Repair of ruptured musculotendinous cuff (eg. rotator cuff) open; chronic	368 (2.45)	223 (4.55)
CPT-23410	Repair of raptured musculotenánous cuff (eg. rotator cuff) open; acute	113 (0.75)	103 (2.10)
	Reconstruction of complete shoulder (rotator) culf avalsion, chronic (includes		
CPT-23420	acromioplasty)	135 (0.90)	86 (1.75)
	Acromicplasty or acromionectomy, partial, with or without coracoacromial		
CPT-23130	ligament release	31 (0.21)	16 (0.33)