

Durable Outcomes After Arthroscopic Posterior Labral Repair at Minimum Ten Years Follow-up

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INTRODUCTION: Posterior shoulder instability represents a growing problem for active-duty servicemembers. While short- and mid-term patient reported outcomes after arthroscopic posterior labral repair are promising, there is no long-term data to establish procedure durability. The present study aims to evaluate patient-reported outcomes at a minimum of 10 years following arthroscopic posterior labral repair.

METHODS: All patients undergoing arthroscopic posterior labral repair over a four-year period at a single institution were eligible for inclusion. Patient reported outcome scores collected included visual analog scale (VAS), American Shoulder and Elbow Surgeons (ASES) score, the Single Assessment Numeric Evaluation (SANE), and the Rowe instability score. All patients were followed for a minimum of 10 years.

RESULTS: A total of 39 patients met inclusion criteria with an average 140 months (11.7 years) of follow-up. VAS, ASES, SANE, and Rowe scores all improved significantly postoperatively (VAS: 7.9 [SD=1.5] to 1.7 [SD=1.8], ASES: 46.7 [SD=9.0] to 87.8 [SD=13.5], SANE: 48.1 [SD=13.6] to 89.1 [SD=12.5], and Rowe: 35.6 [SD=8.8] to 91.3 [SD=9.4]; all with $p < 0.0001$). Outcomes were also clinically significant, with 100% of patients achieving the minimal clinically important difference.

DISCUSSION AND CONCLUSION: At long-term follow-up over a decade postoperatively, patient-reported outcomes after arthroscopic posterior labral repair among active-duty military patients demonstrate sustained statistical and clinical significance. Arthroscopic posterior labral repair appears to be a durable and advantageous treatment for posterior instability in a high-demand population.