

Comparison of Open and Arthroscopic Stabilization for Recurrent Shoulder Dislocation in Patients with Bankart Lesion

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Introduction

The purpose of this study was to compare the results of open and arthroscopic Bankart repair using suture anchors in traumatic anterior glenohumeral instability.

Material and Methods

Fifty shoulders in 50 patients with traumatic unilateral anterior shoulder instability were evaluated using Visual analogue scale (VAS), Rowe and University of California Los Angeles scores, ASES score at an average of 50 months after either an arthroscopic or open Bankart repair using suture anchors. The arthroscopic technique included a minimum of 3 anchors in most patients and a routine incorporation of capsular plication and proximal shift. Of the 50 shoulders, 20 shoulders (20 patients) underwent open Bankart repair and 30 shoulders (30 patients) underwent arthroscopic Bankart repair.

Result

Twenty-six shoulders (86.7%) in the arthroscopic repair group showed excellent or good results, and 17 (85%) shoulders in the open repair group showed excellent or good results. Two patients (6.7%) in the arthroscopic repair group had experienced redislocation after the surgery. Two patient (10%) in the open repair group and 2 (6.7%) in the arthroscopic repair group demonstrated mild apprehension. The overall recurrence rate was 2 of 20(10%) in the open repair group and 4 of 30 (13.3%) in the arthroscopic repair group.

Conclusion

Arthroscopic suture anchor capsulorrhaphy showed similar results to the open Bankart procedure.

Key word: Shoulder instability, Arthroscopy