

재발성 탈구 수술 후 발생한 견관절 관절염에서 인공관절 치환술 Shoulder Arthroplasty for Glenohumeral Arthritis after Instability Surgery

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Glenohumeral osteoarthritis (OA) after shoulder instability surgery is difficult to treat. We report the results from patients treated with arthroplasty in our unit.

Of the 15 patients treated, 9 were received a Total Shoulder Replacement (TSR) and 6 a hemiarthroplasty (HA) at an average age of 40 years (32-69). 10 of 15 had had multiple procedures before the operation (average 4.3)

The results were evaluated after a mean follow-up of 62 months. Mean post-op Constant Score was 46. Subjectively pain was improved in 12 of 15 cases (80%) with improvement in active elevation from 55° to 91° and passive external rotation (ER) from 21° to 36°. The TSR group had better flexion and ER than the HA group. Patients with multiple operations had poor elevation and ER. Five patients (4 with TSR; 1 with HA) subsequently required revision surgery due to glenoid loosening in 3, and recurrent dislocation in 2. Patients who had dislocation after prosthetic replacement had marked capsular deficiency. Three glenoid loosening cases were treated by conversion to hemiarthroplasty in two and revision to a TSR in one.

Shoulder arthroplasty for OA following instability provides pain relief and improved motion but is related to a high revision rate.