

# 64th Annual Orthopaedic Congress of Hellenic Association Athens 2008, Greece

Prospective randomized comparison of single row versus double row  
arthroscopic rotator cuff repair- An MRI controlled study

S.J. Lichtenberg, I. Gavriilidis, M. Wiedemann, P.Magosch,  
P. Habermeyer

**ATOS KLINIK HEIDELBERG**



# MATERIAL & METHODS

- ✓ Prospective, randomized cohort of 46 pat.
- ✓ 41 available for follow up (89%)
- ✓ FU 24 months
- ✓ 19 single row
- ✓ 22 double row
- ✓ MRI pre and post-op
- ✓ CS



# MATERIAL & METHODS

	<b>Total</b>	<b>SR</b>	<b>DR</b>
<b>Age</b>	<b>60(41-76)</b>	<b>60(41-72)</b>	<b>60(46-76)</b>
<b>Gender</b>	<b>M:71.9%</b> <b>F: 28.1%</b>	<b>M:74.1%</b> <b>F: 25.9%</b>	<b>M:70%</b> <b>F: 30%</b>
<b>Onset</b>	<b>T:40%</b> <b>D: 60%</b>	<b>T: 35%</b> <b>D: 65%</b>	<b>T: 45%</b> <b>D: 55%</b>

## ✓ INCLUSION

- ✓ SSP tear < 5 cm  
(Bateman III) incl.  
ISP delamination
- ✓ Retraction  $\leq$  III°  
(Patte)
- ✓ Atrophy < III°  
(Zanetti)

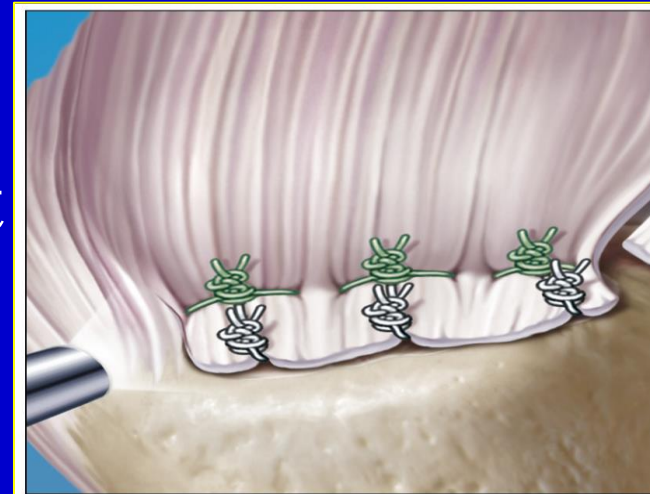
## ✓ EXCLUSION

- ✓ SCP involvement
- ✓ Atrophy  $\geq$  III°
- ✓ Stiffness
- ✓ AHD < 5mm

# TECHNIQUE

## ✓ SINGLE ROW

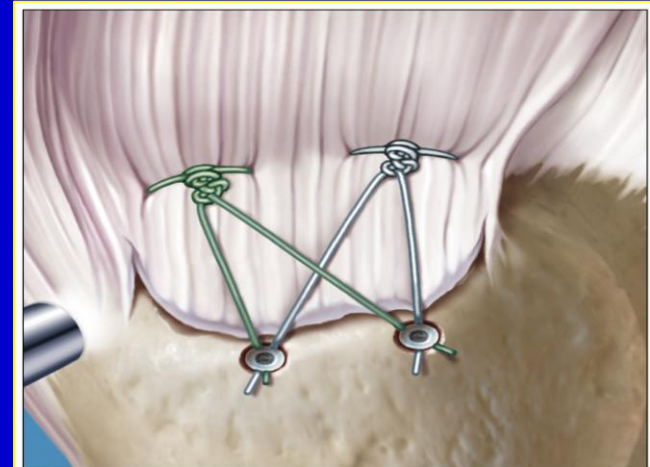
- ✓ Anchor in the middle of foot print (Mason-Allen)



Kap. 2.3.6.4 Fig. 4

## ✓ DOUBLE ROW

- ✓ Suture anchor at osteochondral margin
- ✓ Knotless anchor lateral cortex



Kap. 2.3.5 Fig. 6c

# TEAR SIZE

✓ Bateman I: 9.8%

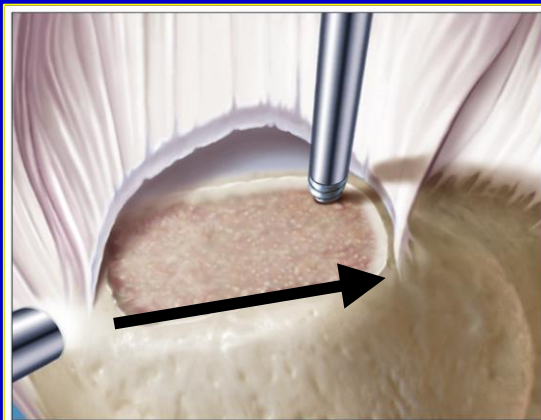
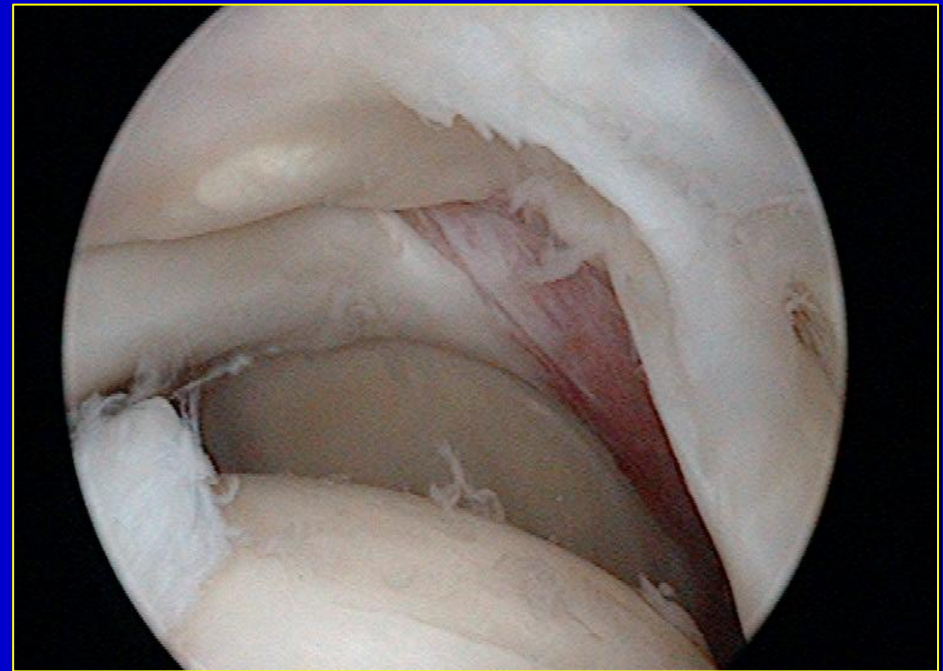
0-1cm

✓ Bateman II: 24.4%

1-3 cm

✓ Bateman III: 65.8%

3-5 cm



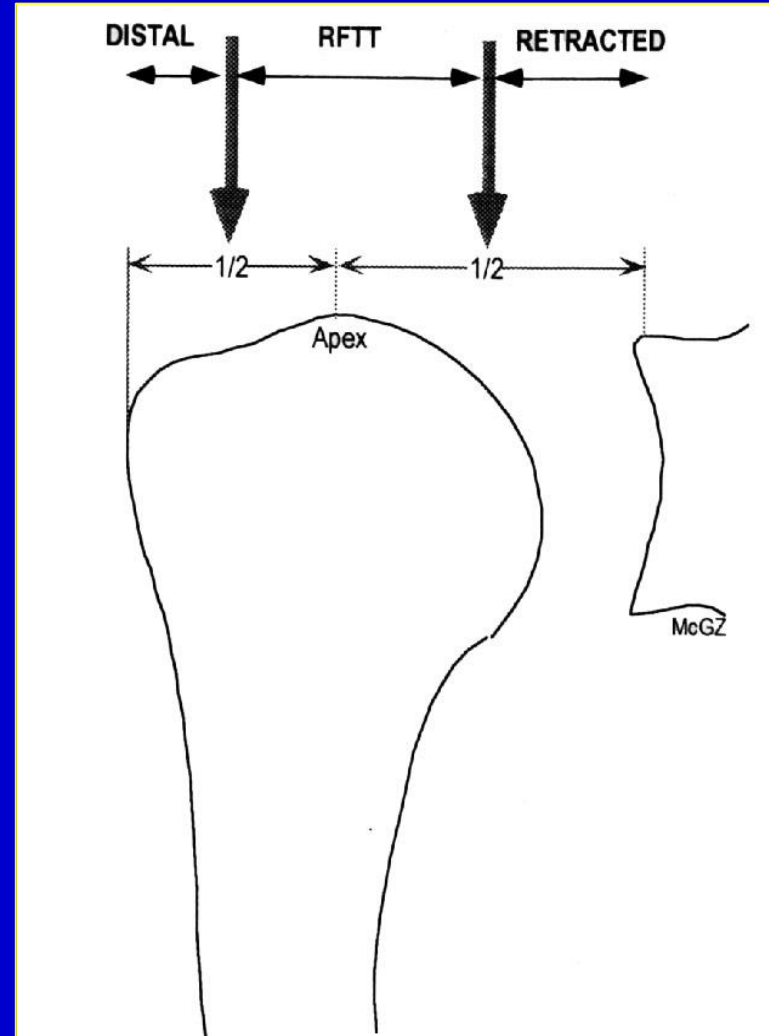
Kap. 2.3.5 Fig. 2

17.02.07

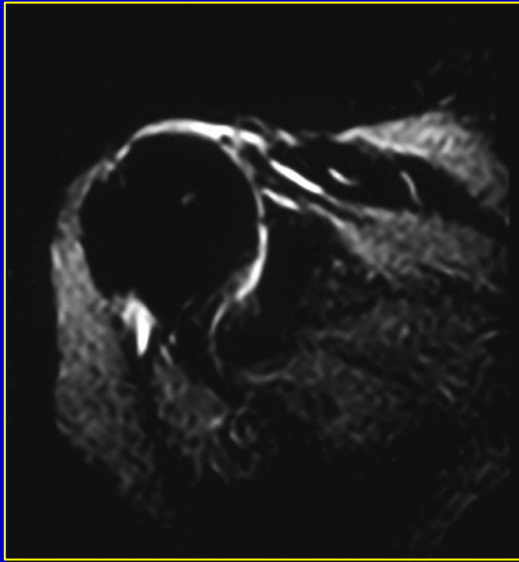


# RETRACTION- PATTE

- ✓ Grade I: 14.3%
- ✓ Grade II: 80.4%
- ✓ Grade III: 5.4%



# RETEAR



- ✓ fluidlike signal intensity on T2-weighted
- ✓ nonvisualization of a portion of the rotator cuff

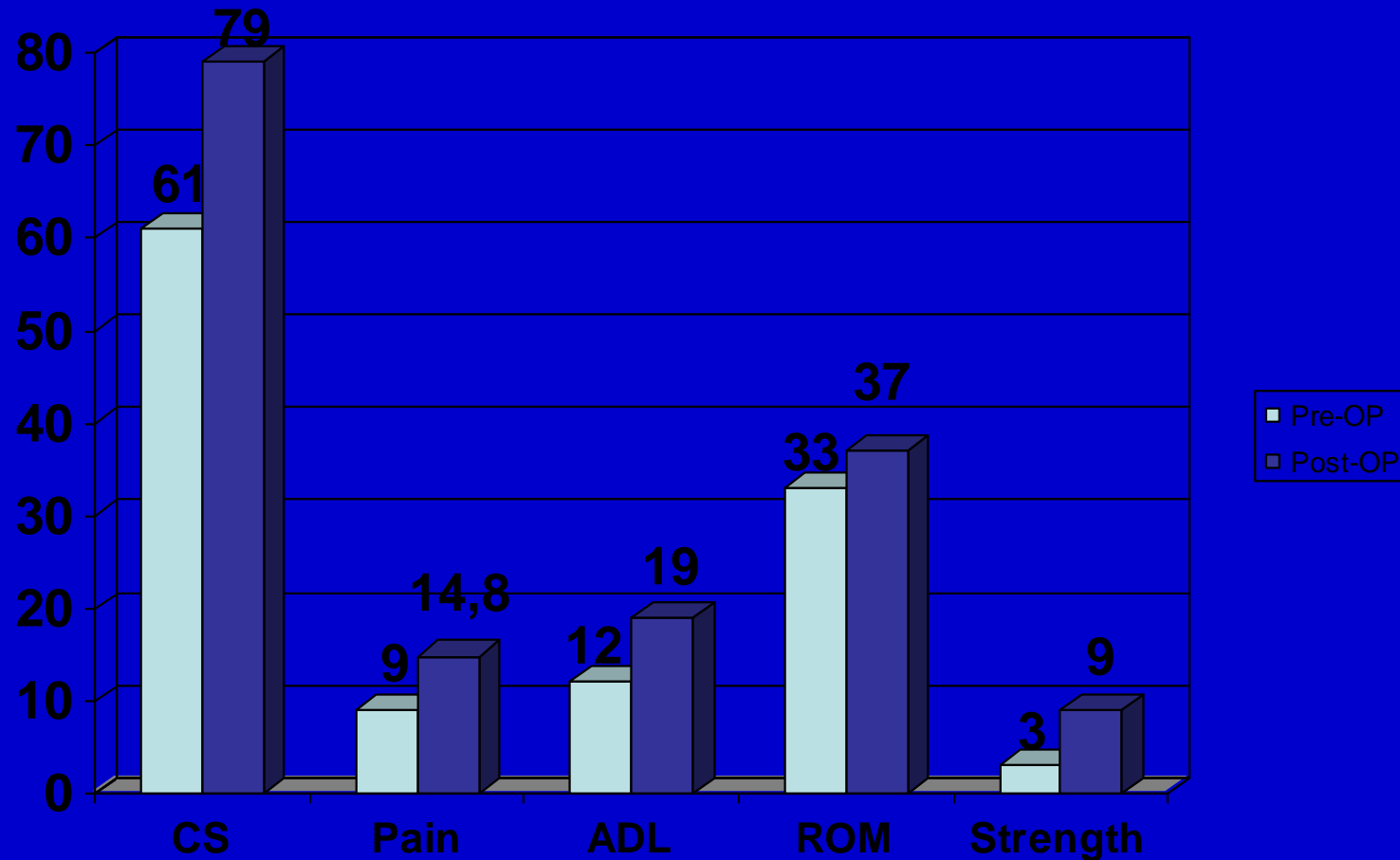
## Retear rate

- ✓ Single row: 26.3%
- ✓ Double row: 21.7%
- ✓ Overall: 23.8%
- ✓ P= 0.342



# RESULTS

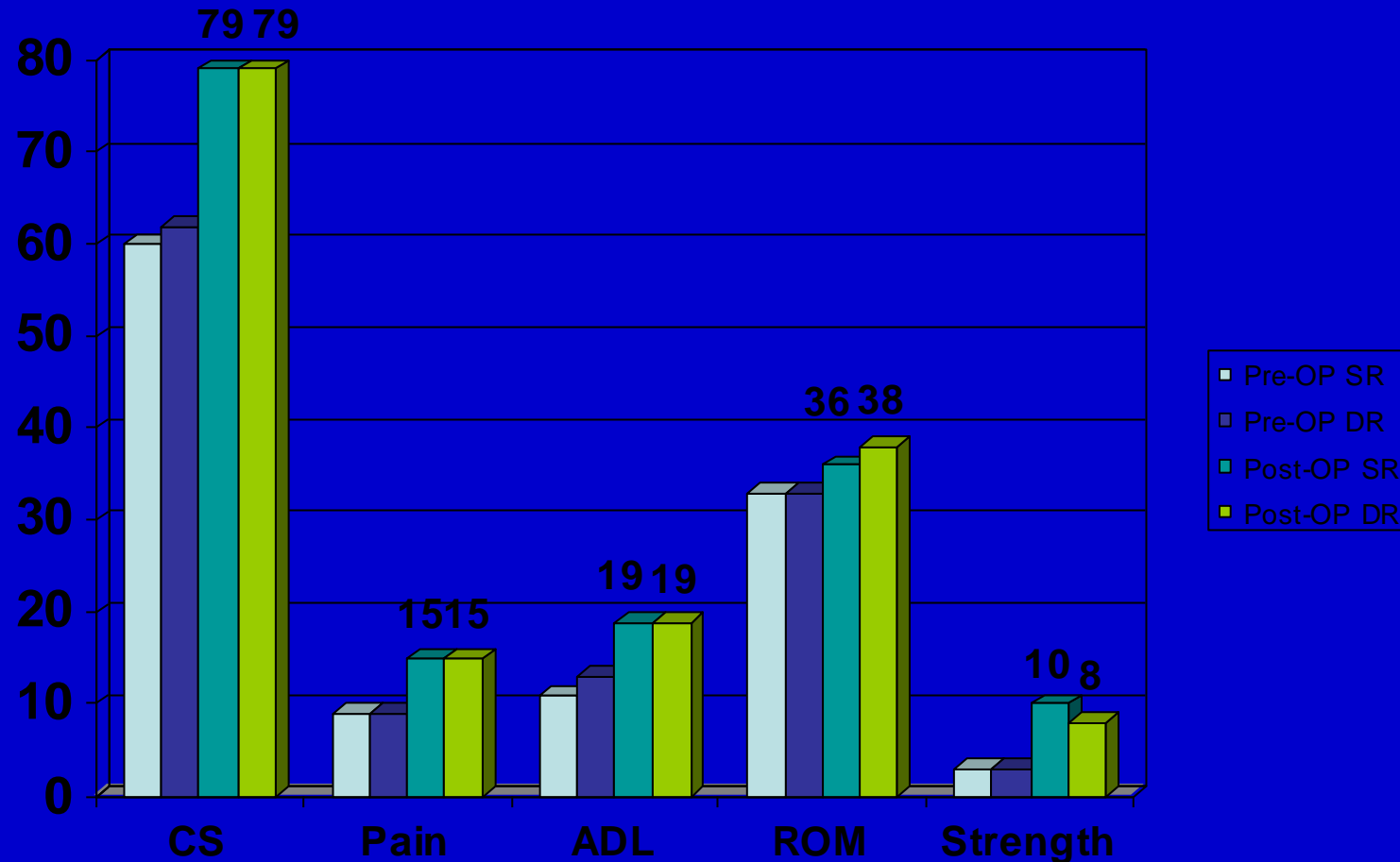
## Constant-Score pre- vs. post-OP



Significant difference pre- to post-OP ( $p < 0.0001$ )

# RESULTS

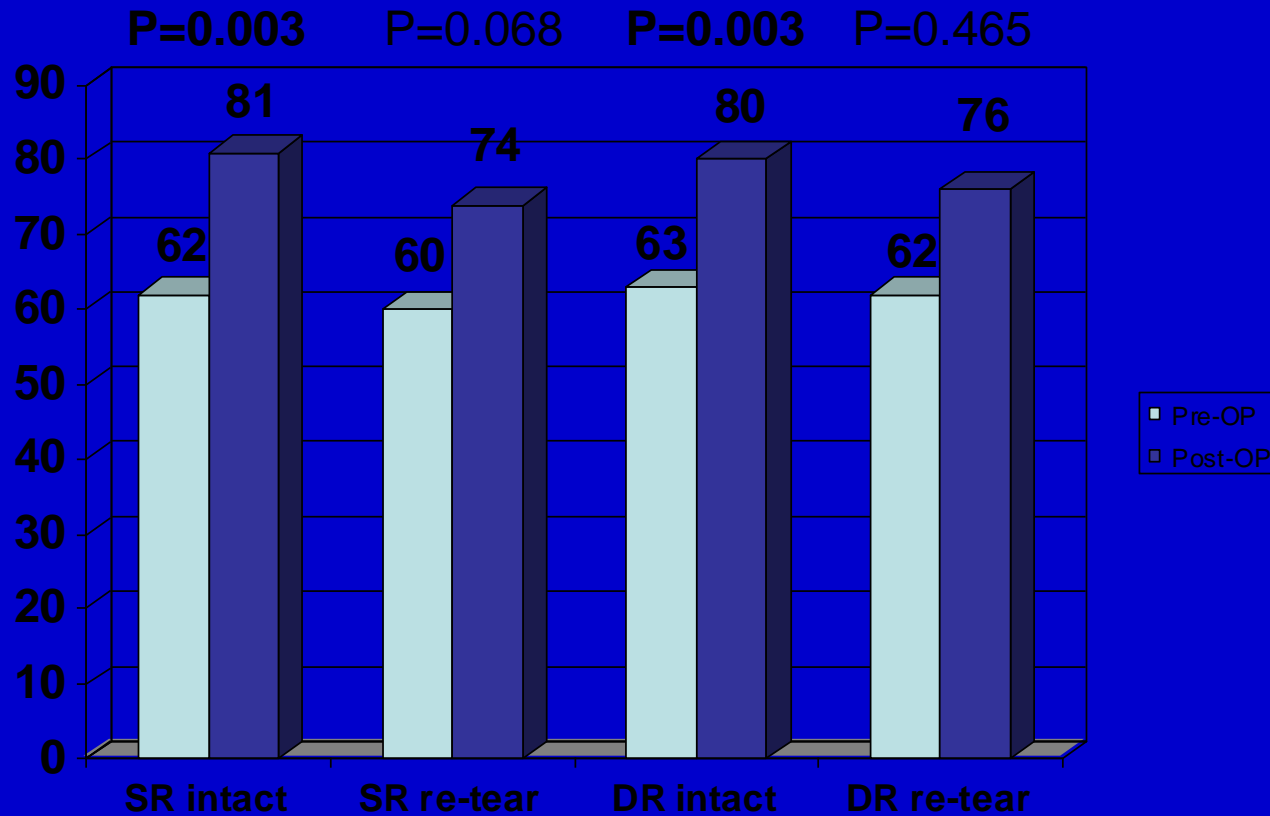
## Constant-Score pre- vs. post-OP



No significant difference between DR vs SR

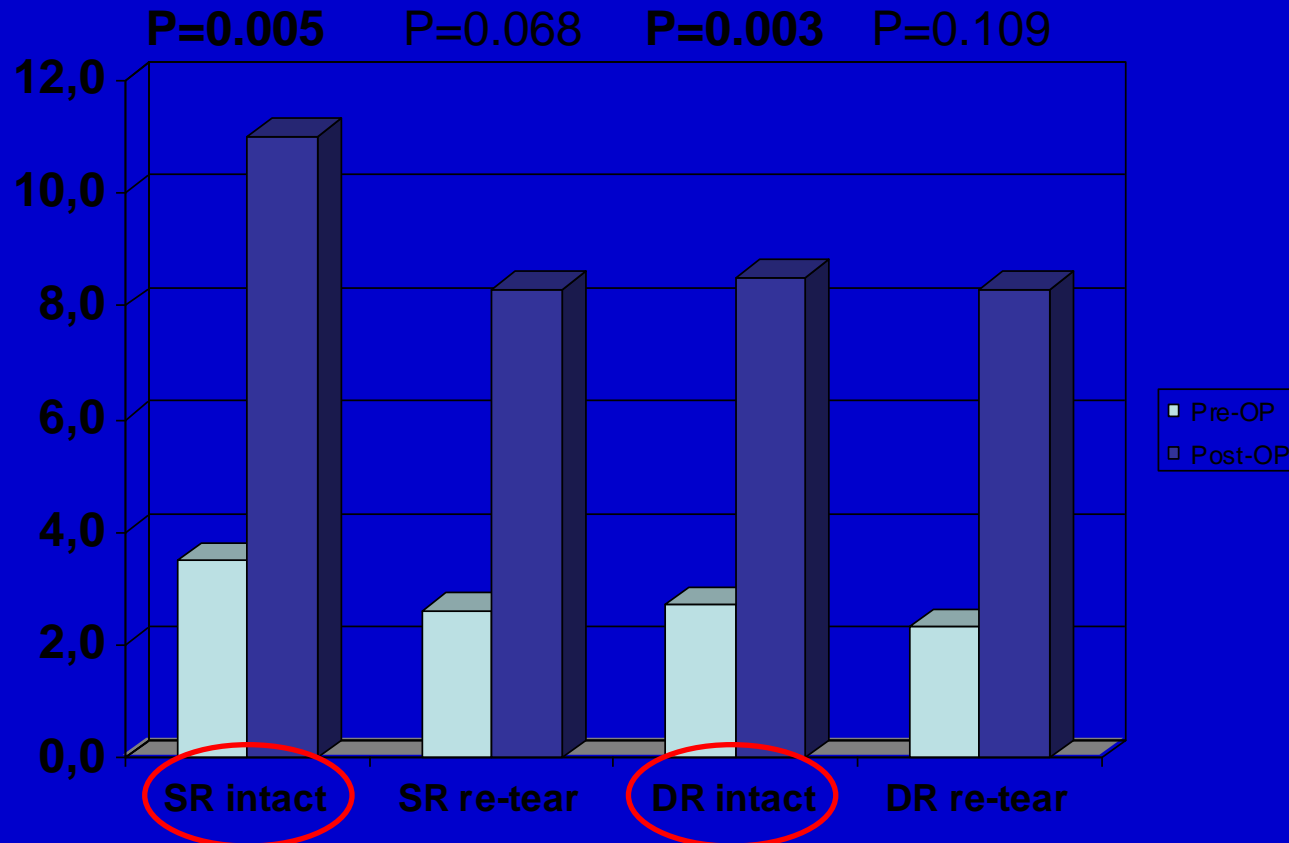
# RESULTS

## Constant-Score re-tear vs. intact



# RESULTS

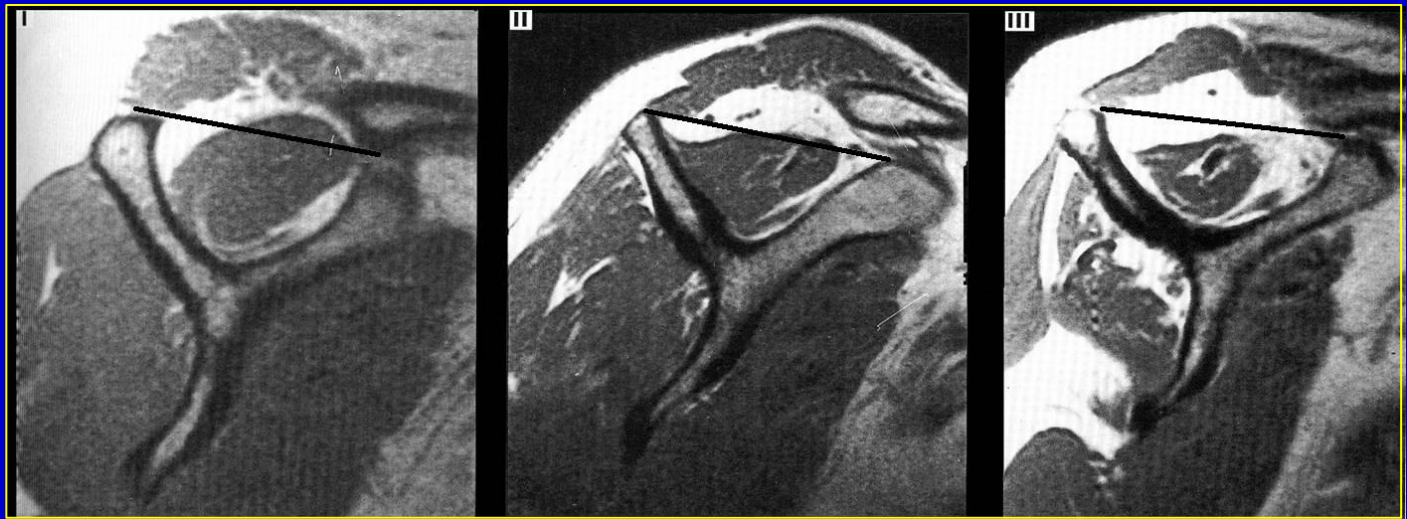
## STRENGTH



No difference between SR vs DR

# ATROPHY (Tangent sign)

no atrophy



50%

45.2%

2.4%

2.4%

20%

68.3%

5.0%

6.7%

# RESULTS

## Atrophy:

- ✓ **Post-OP atrophy significantly greater ( $p=0.002$ )**
- ✓ **No difference between SR or DR neither pre-OP nor post-OP ( $p=0.578$ ;  $p=0.573$ )**
- ✓ **Atrophy sign. higher in re-tears ( $p=0.004$ )**
- ✓ **Stage of pre-OP atrophy negatively influences integrity post-OP = higher re-tear rate with higher degree of pre-OP atrophy ( $p=0.003$ )**



# DISCUSSION

## Re-tear and clinical outcome

Author	N	Tear size	FU	Re-tear	Clinical
Sugaya et al Arthroscopy 2007	SR 39 DR 41	Small 20% Med. 43% Large 37%	35 months	SR 26% DR 10% Sign.	No difference
Franceschi AJSM 2007	SR 26 DR 26	Large to massive	24 months	SR 7.7% DR 3.8% Ns	No difference
Park et al. AJSM 2008	SR 40 DR 38	Med. 59% Large 41%	24 months	?????	DR sign better in large tears
Lichtenberg ASES 2008	SR 19 DR 22	Large 66% Med. 24% Small 10%	24 months	SR 26.3% DR 21.7% Ns	No difference

# DISCUSSION

## ATROPHY

✓ **Shen et al. JSES 2007:**

**Positive correlation of atrophy on functional outcome**

✓ **Liem et al. JBJS 2007:**

**Less atrophy pre-op less post-op re-tears**

**FI stage II pre-op showed more pos-op re-tears**

✓ **Lichtenberg et al. ASES 2008:**

**The more pre-op atrophy, the higher the risk to experience re-tear post-op**

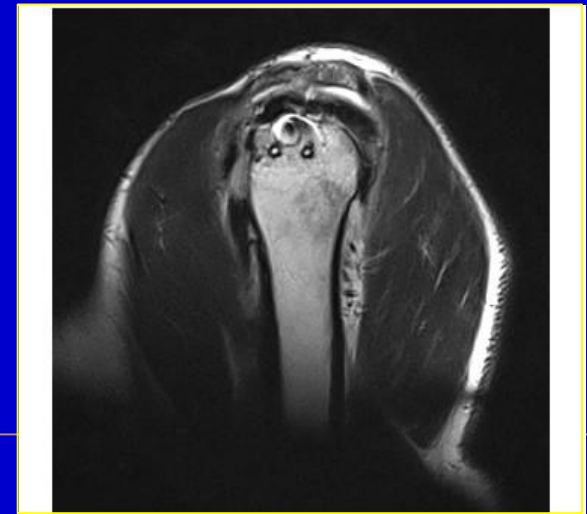
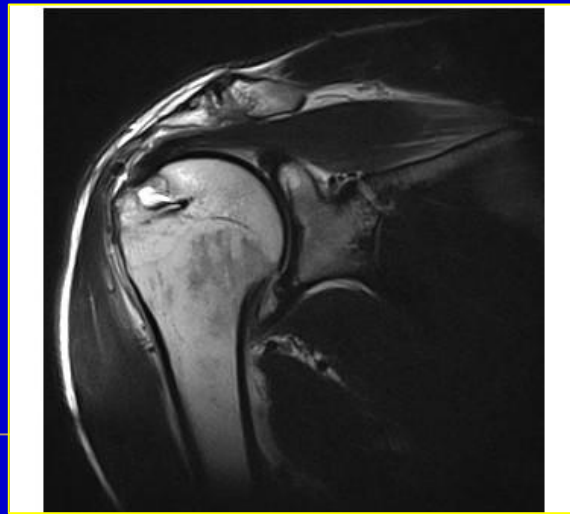
# CONCLUSION

## DR vs SR

- ✓ NO significant difference in clinical outcome
- ✓ Trend towards lower re-tear rate (21.7% vs 26.3%)

## Atrophy

- ✓ Pre-op atrophy influences post-op re-tear rate negatively



# HEIDELBERG SHOULDER CONVENTION 2008

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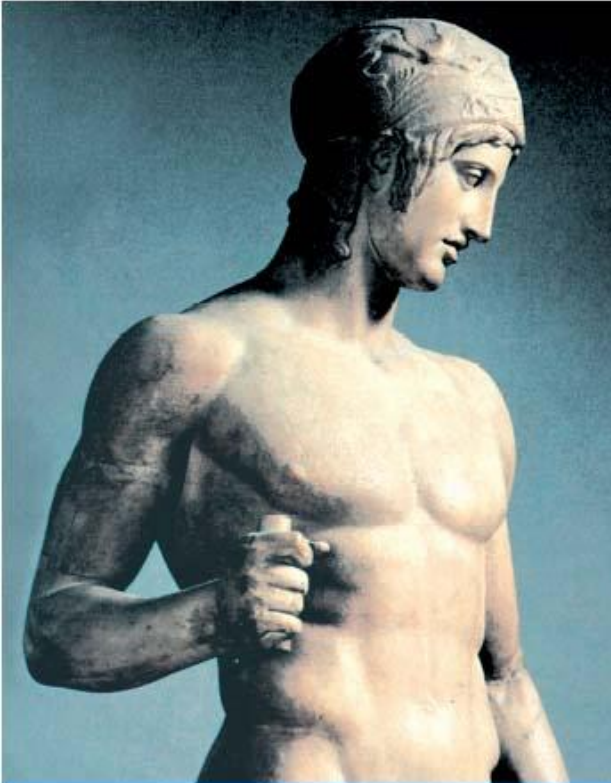
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**THANK YOU!**