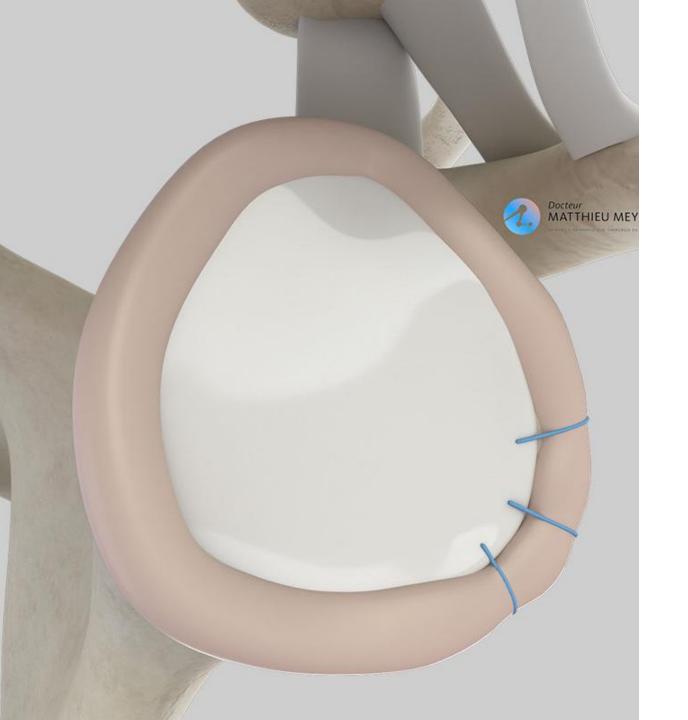
POST-OP MANAGEMENT FOLLOWING REMPLISSAGE AND LATARJET PROCEDURES

KEVIN AXTMAN PT/ATC



BANKART REPAIR

BANKART REPAIR REMAINS
THE GOLD STANDARD IN
SURGICAL SHOULDER
STABILIZATION.

TRAUMATIC GLENOHUMERAL BONE DEFECTS AND THEIR RELATIONSHIP TO FAILURE OF ARTHROSCOPIC BANKART REPAIRS: SIGNIFICANCE OF THE INVERTED-PEAR GLENOID AND THE HUMERAL ENGAGING HILL-SACHS LESION

BURKHART, ARTHROSCOPY, 2000



- Patients without bone loss
 - 7 of 173 (4%) with recurrence
- Patients with bone loss
 - 14 of 21 (67%) with recurrence
- Contact athlete and bone defect
 - 89% recurrence

ARTHROSCOPIC BANKART REPAIR: PREDICTORS OF FAILURE FOX, ARTHROSCOPY, 2023

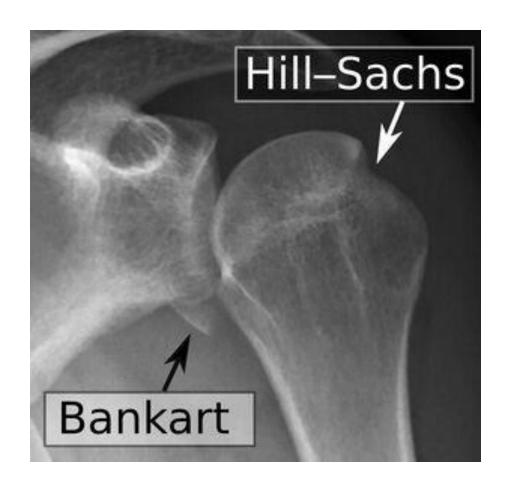


•	Recurrent	dis	location
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Revision surgery

Single dislocation	Second dislocation		
(63)	(14)		
9(14.2%)	6(42.8%)		
12(19.0%)	6(42.9%)		

HILL-SACHS LESION FREQUENTLY NOTED FOLLOWING AN ANTERIOR SHOULDER DISLOCATION



35% to 70% of anterior dislocations.

If the Hill-Sachs lesion engages it can cause recurrent shoulder instability.

REMPLISSAGE PROCEDURE

Filling in the Hill-Sachs defect with the infraspinatus tendon (capsulotenodesis).





CONSIDERATIONS FOR REHABILITATION FOLLOWING A REMPLISSAGE PROCEDURE

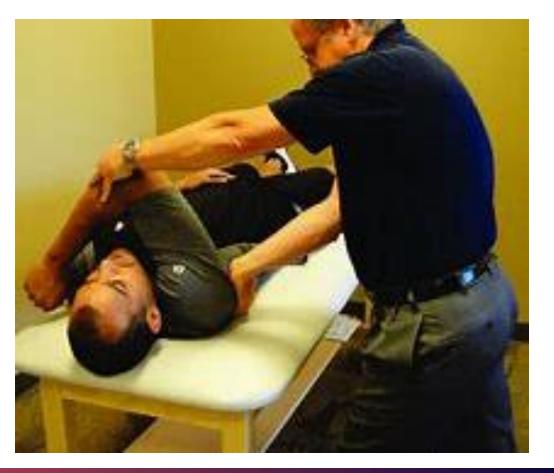
Timeframes will follow very closely the anterior Bankart repair rehabilitation with <u>rotator cuff precautions</u>.

There will be some loss of IR with this procedure.

STRETCHES TO AVOID

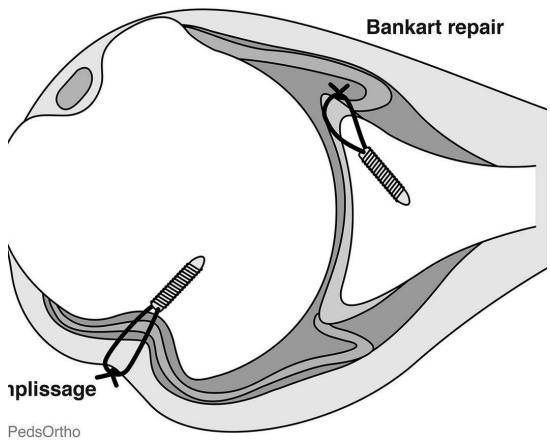
AVOID STRETCHING THE POSTERIOR STRUCTURES TO QUICKLY WITH ACTIVITIES SUCH AS THE SLEEPER STRETCH AND CROSS BODY STRETCH.





AVOID EARLY STRENGTHENING OF POSTERIOR CUFF STRENGTHENING FOR THE POSTERIOR CUFF NOT INITIATED TILL 8-12 WEEKS POST-OP





PHASES OF REHABILITATION REMPLISSAGE

Initial Phase - **0-6 weeks**; Protect the repair/s; in sling first 4-6 weeks. Passive ER motion to protect the infraspinatus and limited ER motion to protect the anterior structures (Bankart repair), IR and horizontal adduction motion limited to protect posterior repair(Remplissage).

Phase 2 – 6-12 weeks; Progress PROM - AROM while protecting the healing structures. Submax strengthening and stretching.

Phase 3 – 12 weeks plus; progress with strengthening the posterior cuff and progress stretching the posterior shoulder.

Phase 4 – 20 weeks plus; prepare for return to sport.



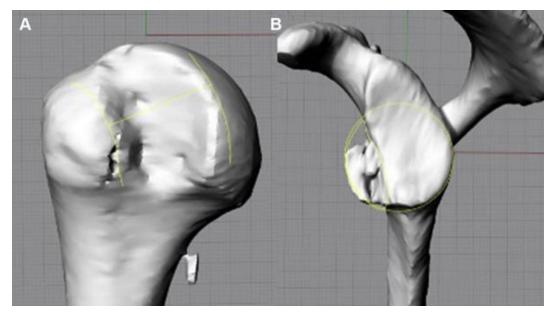
RETURN TO SPORT AFTER
ARTHROSCOPIC BANKART REPAIR WITH
REMPLISSAGE: A SYSTEMATIC REVIEW
GOUVEIA, ARTHROSCOPY, '2023

Rate of Return to Sport ranged from 60% to 100%.

Return to Sport rates for contact/collision sports ranged from 80% to 100%

Return to Sport rates for overhead/throwing athletes was 46% to 79%.

LATARJET PROCEDURE



- Glenoid bone loss
- A portion of the corcoid is transferred to augment or deepen the glenoid and creating a musculotendinous sling to prevent instability.

LIMIT BICEPS ACTIVITY FIRST 6 WEEKS









ELEVATION ACTIVITIES BEGIN IN THE PLANE OF THE SCAPULA





PHASES OF REHABILITATION LATARJET PROCEDURE

- Initial Phase 0-6 weeks; Protect the bony glenoid augmentation. PROM done in the "plane of the scapula". 4 weeks start AAROM
- Phase 2 6-9 weeks; Progress AAROM-AROM. Slower with ER ROM initially progressing to tolerance after 8 weeks. Posterior capsule stretching. IR/ER strengthening.
- Phase 3 10-15 weeks; Strengthening progressed including biceps, coracobrachialis, subscapularis, and pectoralis group.
- Phase 4 16 weeks plus; Continue stretching as needed. Maintain full non-painful AROM. Progression with overhead activities and return to play.

Hamerle, AAOS, '2023

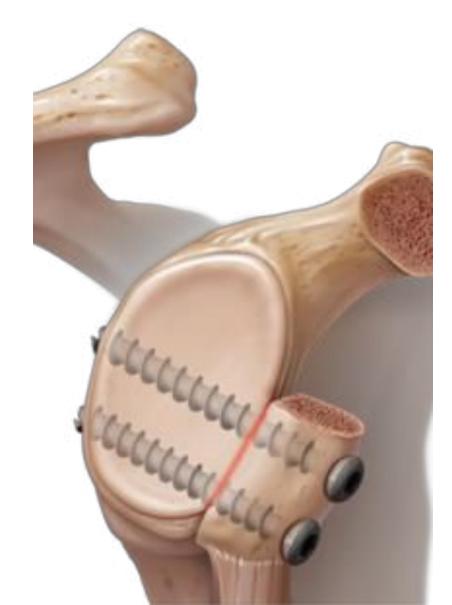
Fedorka, Phys Sportsmed, '2015

RETURN TO SPORT AFTER AN OPEN LATARJET PROCEDURE

ERNAT, JSES, 2022

97 % patients returned to sport

(74% returning at the same level or slightly below.)



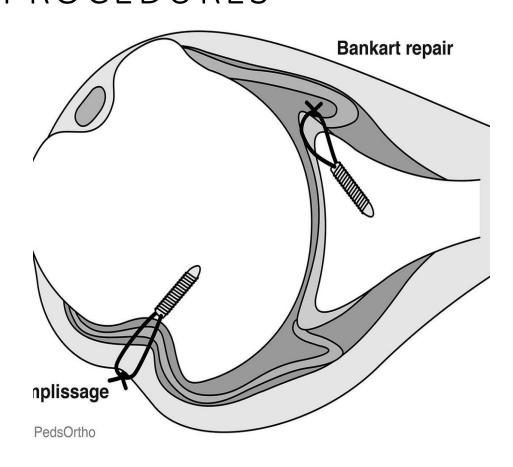


WATCH FOR SCAPULAR DYSKINESIS

SCAULAR DYSKINESIS AFTER LATARJET PROCEDURE, JSES, CARBONE 2016

- MAY BE RELATED TO THE
DETACHMENT OF THE
PECTORALIS MINOR AND
CHANGE IN FORCE OF THE
CORACOBRACHIALIS AND SHORT
HEAD OF THE BICEPS.

REMPLISSAGE AND LATARJET PROCEDURES





THANK YOU

Kevin Axtman PT/ATC kaxtman@bone-joint.com