Pathological humeral translation that results in clinical symptoms of pain & dysfunction

- Instability (symptom)
  ranging from a vague sense of shoulder dysfunction to an obvious fixed dislocation

- Laxity (sign)
TUBS or “Torn Loose”

- Traumatic aetiology
- Unidirectional instability
- Bankart lesion is the pathology
- Surgery is required

AMBRI or “Born Loose”

- Atraumatic:
- Multidirectional instability
- Bilateral: asymptomatic shoulder is also loose
- Rehabilitation
- Inferior capsular shift: surgery required if conservative measures fail

Matsen's classification system
Decision Making

Muscle Patterning
Proprioceptive

→

Physiotherapy + Surgery

Structural
- Soft tissue
- Bony

→

Surgery + Physiotherapy
Physiotherapy

- ROM
- Proprioception
- Strength
  - Deltoid & RC muscles
  - Scapular Muscles
Operative Treatment of Anterior Shoulder Instability

Soft tissue procedures:
• Subscapularis Muscle Procedures (Putti-Platt, Magnuson-Stack)
• Bankart Procedure
• Capsular Reconstruction (Neer capsular shift)

Bony procedures:
• Coracoid Transfer (Bristow-Latarjet Procedure)
• Osteotomy of the Proximal Humerus (Weber rotational osteotomy)
• Bone Block (Eden-Hybbinette Procedure)
• Osteotomy of the Neck of the Glenoid
Soft tissue procedures:

**Subscapularis Muscle Procedures**

- Not correcting a labral or capsular defect
- Restriction of ER
Bankart Procedure

- gold standard
- recurrence rates from 3% to 10%
- Open or arthroscopic
Soft tissue procedures:

**Capsular Reconstruction (Neer capsular shift)**

- Procedure for multidirectional instability
- Correct loose, redundant inf. pouch
Capsular Plication – How much?

• Symptoms – direction of instability
• EUA (Exam under anesthesia)

From: Copeland, Operative Shoulder Surgery
Capsular Plication (capsular shift)
Osteotomy of the Proximal Humerus
(Weber subcapital osteotomy)

- increased the humeral head retroversion
- Indicated in posterolateral humeral head defect
- Requirement for second operation for plate removal
Bony procedures:

**Coracoid Transfer (Bristow-Latarjet Procedure)**

- Not correcting a labral or capsular defect
- Restriction of ER
- Possibility of musculocutaneous N. damage
- Decrease of IR power
- Osteoarthritis ↗
Osteotomy of the Neck of the Glenoid

- Change the glenoid version
- posterior closing-wedge or anterior opening-wedge osteotomy
- too hazardous
Bony procedures:

**Bone Block (Eden-Hybbinette Procedure)**

- Extend the anterior glenoid by iliac graft
- Postoperative degenerative change
Burkhart SS, DeBeer JF. Arthroscopy 16:677, 2000.)

The diagram illustrates the placement of a coracoid graft for rotator cuff repair. The left panel shows a graft that is too lateral, and the right panel shows a graft that is too medial.
Summary

Instability

Traumatic  Atraumatic

Structural  Muscle Patterning

Surgery  ↔  Physiotherapy

Thank you for attention