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Original Article With Video Illustration

Arthroscopic Remplissage With Bankart Repair for the Treatment of Glenohumeral Instability With Hill-Sachs Defects

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Purpose

To determine whether arthroscopic remplissage with Bankart repair is an effective treatment strategy for patients with Bankart lesions and large Hill-Sachs defects.

Methods

Between 2006 and 2008, 20 patients underwent arthroscopic Bankart repair with remplissage for the treatment of recurrent anterior glenohumeral instability and large Hill-Sachs defects. Preoperative imaging in all patients identified avulsion of the anterior inferior glenohumeral ligament with an associated Hill-Sachs defect that involved greater than 25% of the humeral head. Patients were followed up postoperatively with the Western Ontario Shoulder Instability score, the American Shoulder and Elbow Surgeons

score, and the Penn Shoulder Score. Recurrent subluxation or dislocation was documented.

Results

There were 15 male patients and 5 female patients. The mean age of the patients was 27.3 years. The mean length of follow-up in this series was 29.2 months (range, 24.3 to 37.7 months). At final follow-up, 3 patients reported recurrence of instability, which spontaneously reduced in all cases. The mean American Shoulder and Elbow Surgeons score was 92.5 (pain, 47.3; function, 45.3). The mean Penn score was 90 of 100 (pain, 27.3 of 30; satisfaction, 8.5 of 10; function, 54.3 of 60). The mean total Western Ontario Shoulder Instability score was 72.74% (mean physical symptom score, 77.10%; mean sports and recreation score, 70.25%; mean lifestyle score, 75%; mean emotions score, 58.50%).

Conclusions

Using an all-arthroscopic remplissage technique with Bankart repair, we were able to restore function, diminish pain, and yield satisfaction in 85% of the patients in this study. Our results compare favorably with historic controls with similar pathology at early- to intermediate-term follow-up in terms of recurrence.

Level of Evidence

Level IV, therapeutic case series.



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Research was performed at the University of Pennsylvania and Temple University. The authors report no conflict of interest.

Note: To access the video accompanying this report, visit the September issue of *Arthroscopy* at www.arthroscopyjournal.org.

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