

# Outcome after rotator cuff repair

- 2nd World Champion in shot put 2019





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Medicine and Science for Extreme Sports

# Shoulder – Instability



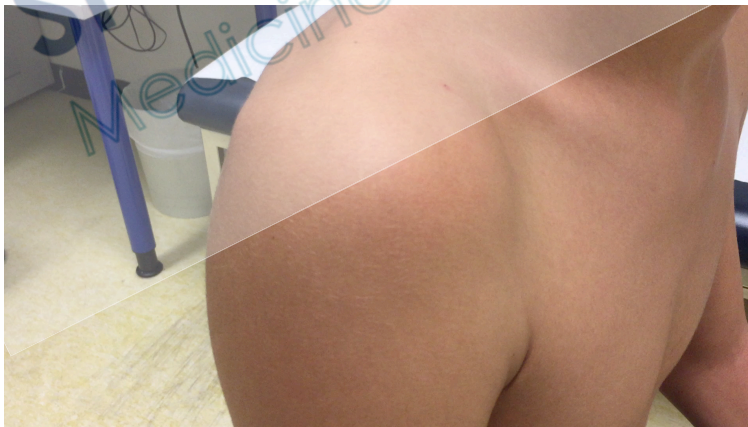
# Shoulder – Instability

acute – traumatic versus chronic - hyperlaxity

- **Shoulder instability: Matsen's classification**  
Matsen EA et al, Clin Sports Med,10:783-788, 1991

**TUBS:** Trauma  
Unidirectional  
Bankart  
Surgery

**AMBRII:** Atraumatic  
Multidirectional  
Bilateral  
Rehabilitation  
inferior capsule and Interval



- **Shoulder instability: Gerber's classification**  
Gerber C et al, CORR, 400:65-76, 2002

## **Class A: Static Instabilities**

Class A1: static superior subluxation  
Class A2: static anterior subluxation  
Class A3: static posterior subluxation  
Class A4: static inferior subluxation

## **Class B: Dynamic Instabilities**

Class B1: chronic locked dislocation of the shoulder  
Class B2: Unidirectional instability without hyperlaxity  
Class B3: Unidirectional instability with hyperlaxity  
Class B4: multidirectional instability without hyperlaxity  
Class B5: multidirectional instability with hyperlaxity  
Class B6: multidirectional or unidirectional instability with voluntary instability

## **Class C: Voluntary dislocations**

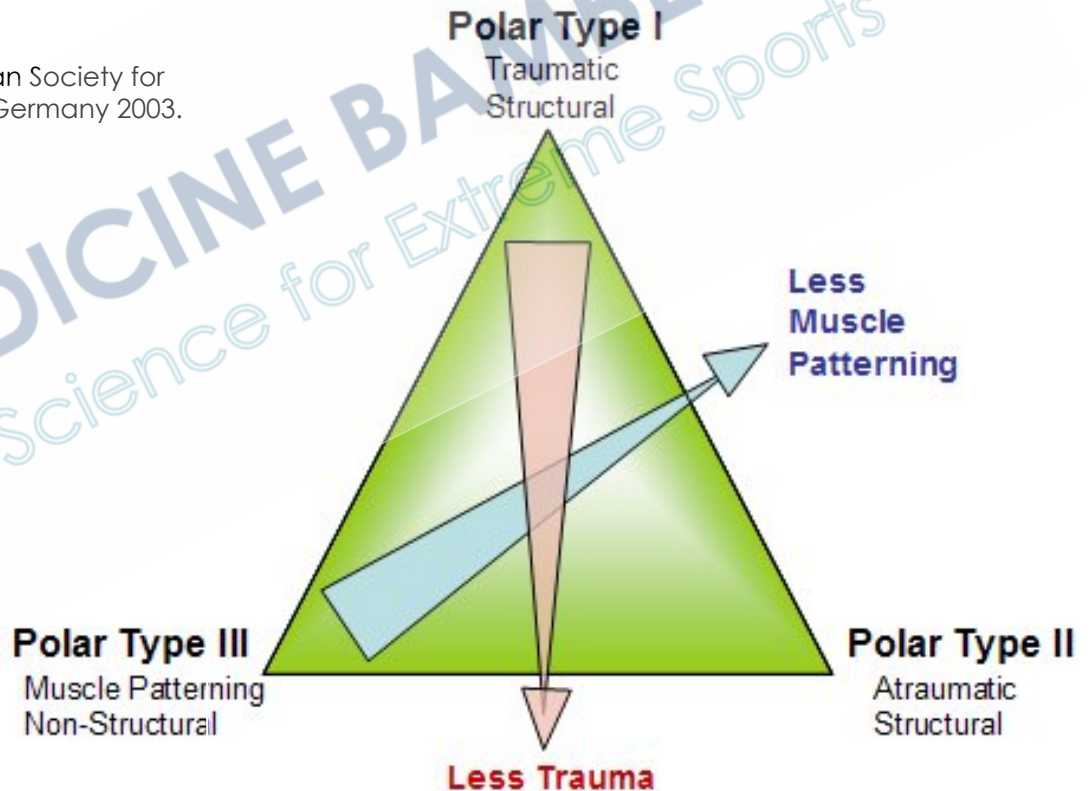
# Shoulder – Instability

acute – traumatic versus chronic - hyperlaxity

□ **Shoulder instability: Bayley classification**

Bayley I, In: The 17th Congress of the European Society for the Surgery of the Shoulder and the Elbow, Germany 2003.

1. Traumatic structural
  - a. acute
  - b. persistent
  - c. recurrent
2. Atraumatic structural
  - a. recurrent
3. Non-structural (muscle patterning)
  - a. recurrent
  - b. persistent

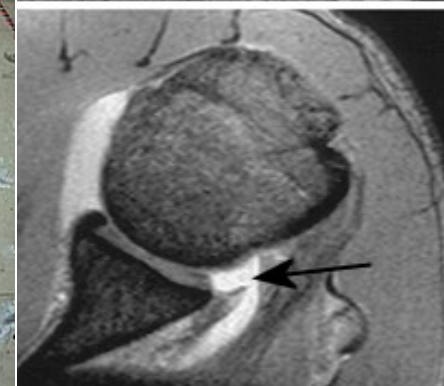
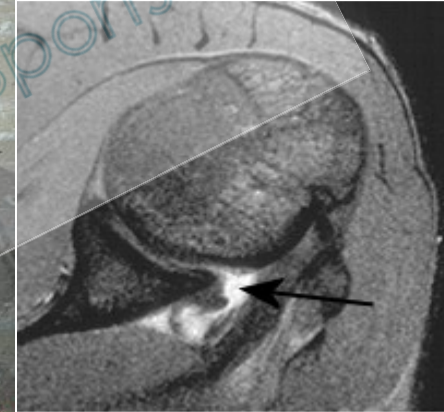


# Shoulder – Instability

acute – traumatic versus chronic - hyperlaxity



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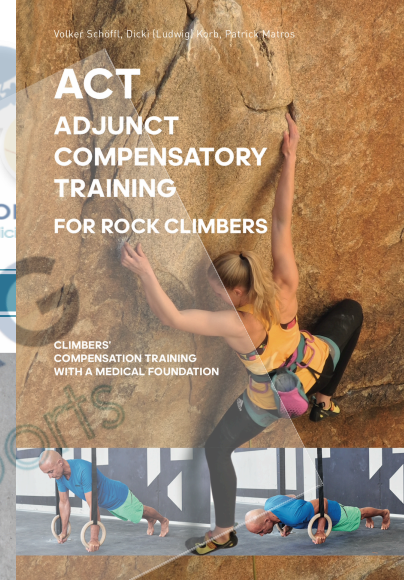
# Shoulder – Instability

chronic - hyperlaxity

- conservative



# Preventive Measures



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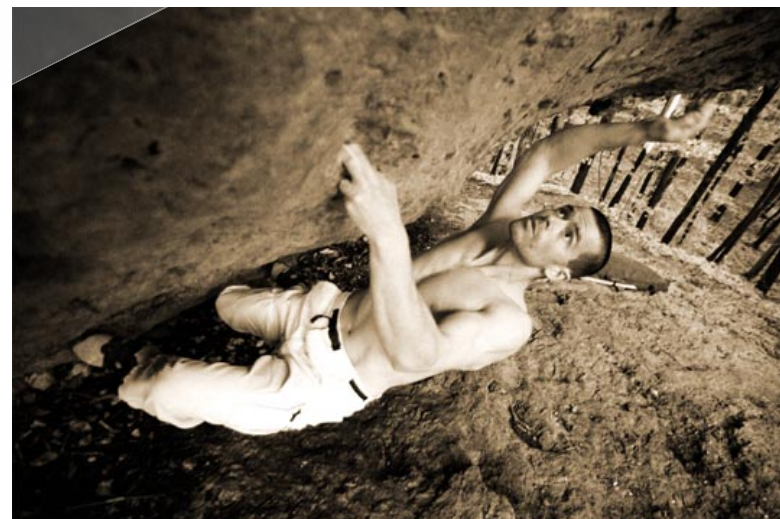
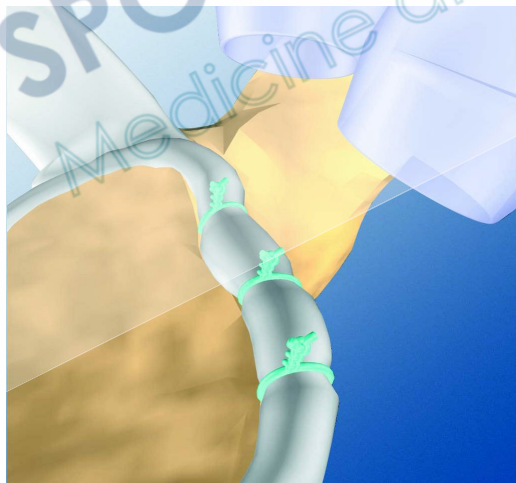
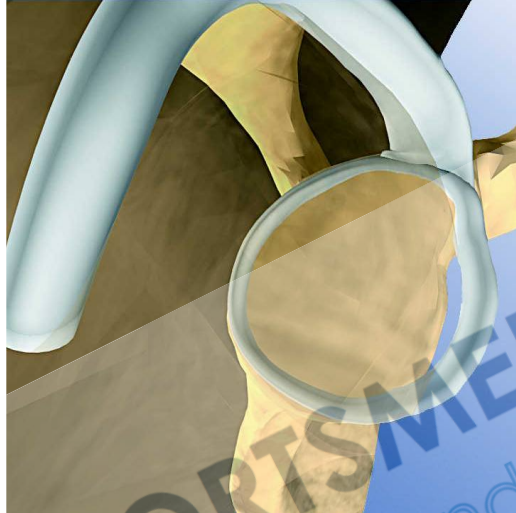


# Shoulder – Instability

acute – traumatic: Bankart repair



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# Shoulder – Instability

## acute – traumatic: Bankart repair

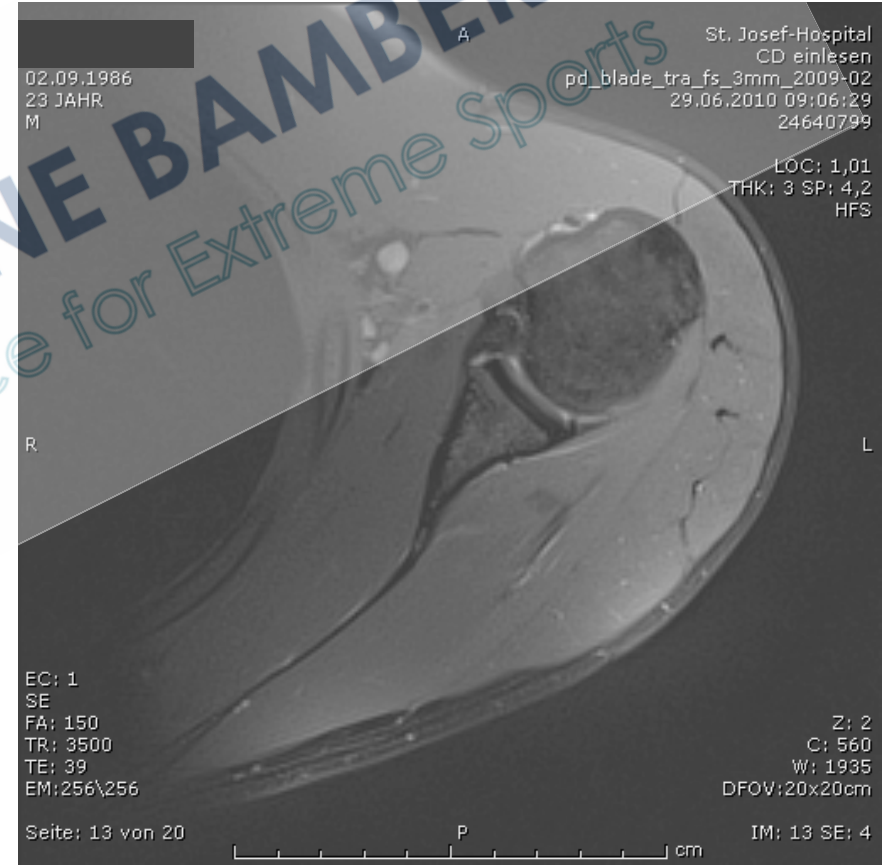
- Our approach:
- < 30 y: primary surgery
- < 50 y: MRI and possible surgery
- > 50 LJ: conservative (exception: sportive patient)



# Shoulder –Instability J.B.23, WC Vail 2010



# Shoulder –Instability J.B.23, WC Vail 2010



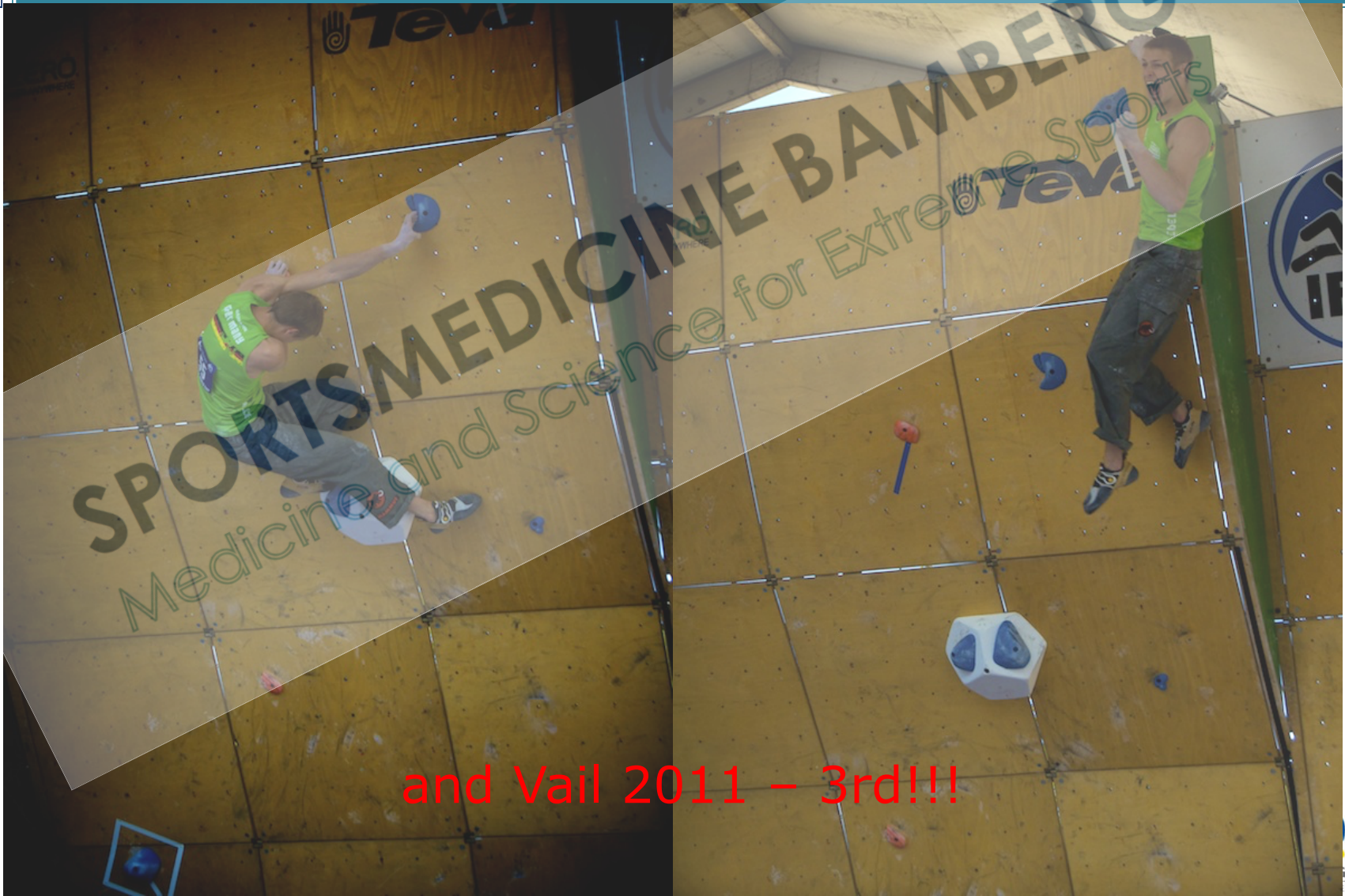
# Shoulder –Instability J.B.23, WC Vail 2010



# Shoulder –Instability J.B.23, WC Vail 2010 4 months later



# Shoulder –Instability J.B.23, WC Vail 2010 99 months later

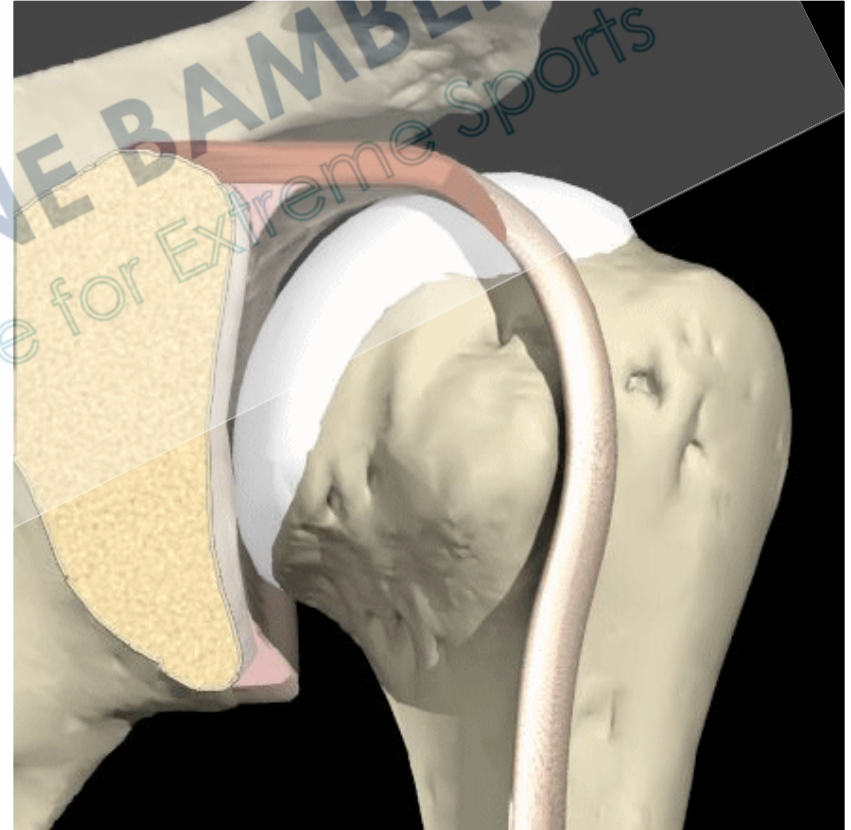


# Rupture long biceps tendon



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- Mostly degenerative
- rarely pure traumatic



# Rupture long biceps tendon: Tx

- conservative: patients age  $> 50/60$  y
- Surgical depending on patients demands
- surgically  $< 40, < 50$ ...

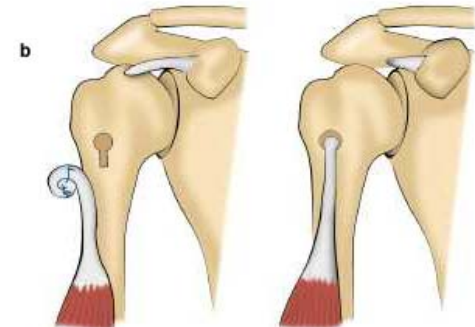
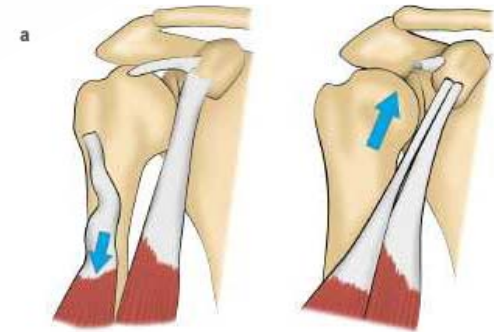
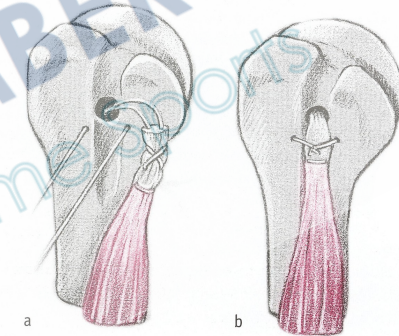
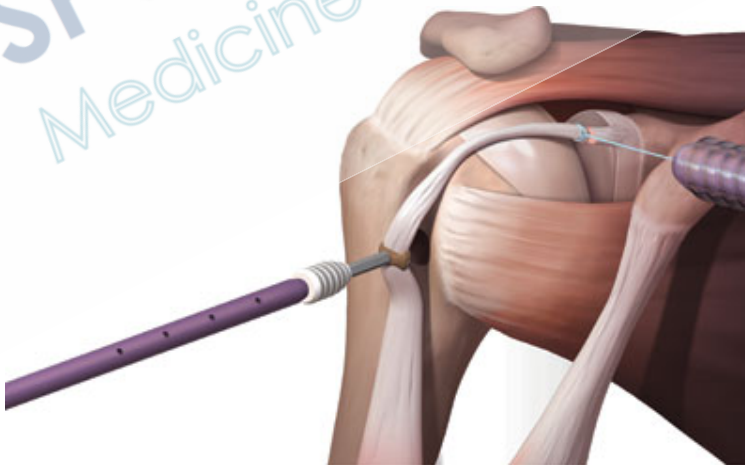


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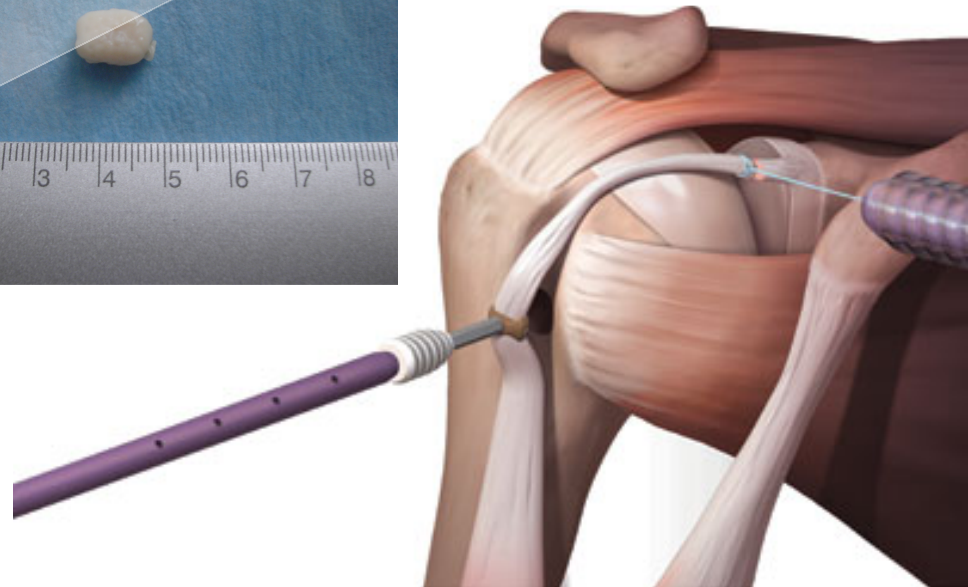




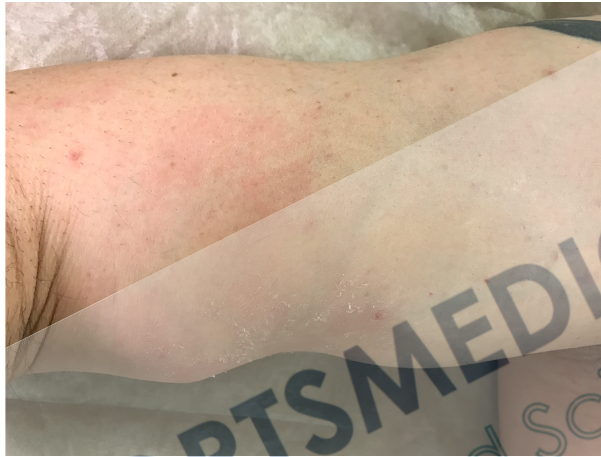
# Rupture long biceps tendon: Tx



# Rupture long biceps tendon: Tx



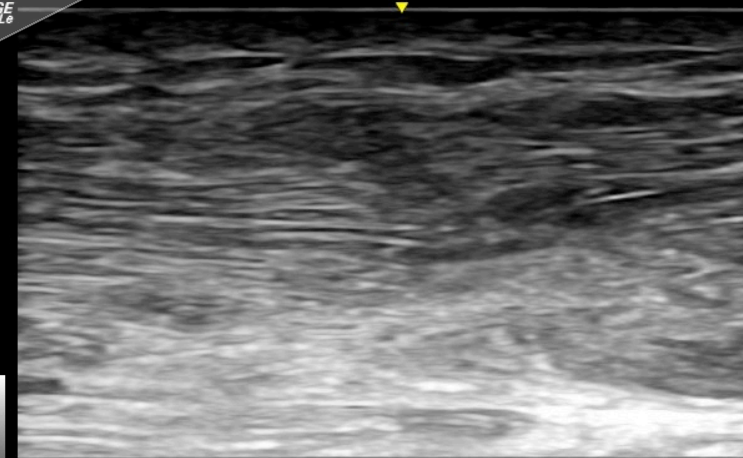
# Complete biceps muscle tear



# Complete biceps muscle tear



MVZ am Bruderwald, Orthopaedie geiger, frank  
13/04/17 09:33:08 VSC 130417-092947mvz, 22/04/74 MI 0.9



# Complete biceps muscle tear 1 y later

