

Update on all @ Latarjet technique



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Latarjet @

- *L Lafosse* et al (all @Latarjet)
Arthroscopy 2007;23(11):1242-1245
- *P Boileau* et al (@Bristow)
Arthroscopy 2007;23(6):593-601
- *P Boileau* et al (@Bankart Bristow Latarjet)
Arthroscopy 2010;26(11):1434-1450

More and more « popular »
Surgical challenge
Long learning curve

Literature @

L Lafosse et al AJSM 2014



Courtesy L Lafosse

@ Latarjet procedure

- N= 62 patients FU > 5 years
- No dislocation . One subluxation
- 10 patients returned operating room(16%)
 - * 1 displaced coracoid graft
 - * 8 to remove the screw
 - * 1 arthritis to arthroplasty
- 3 hematomas

Literature @

P Boileau et al Shoulder concepts Nice 2014

Bristow Latarjet Bankart procedure (Cortical Button)

- N= 36 patients mean FU 12 months
- No recurrent dislocation
- No implant migration
- Good healing 33 patients (92%) CT Scan
- 93% return S sport



Courtesy P Boileau

Arthroscopic versus Open Latarjet



French Arthroscopic Society 2015

Laurent Lafosse & Gilles Walch

Population of the study

1. @Latarjet learning curve : **125** first cases (5 x 25)
2. @ Latarjet . Operative difficulties : **1555** cases
3. Clinical, X-Ray & CT scan post op study. : **390** patients
 - @ Latarjet : 222
 - Endo Bouton : 64
 - Open Latarjet : 104
 - > One year FU

First cases n =125 cases

Main complications

Recurrent dislocation 6 %
 Surgical revision 0.8%
 Neurological complication 0.8%
 Hematoma 8 %

No Infection

**Operative difficulties
 serie 1555 cases**

1. Subscapularis Split level
2. Passing through the subscapularis
3. Conditions of visualization
4. Positioning of the screws

Serie n= 390 cases

Main post op complications

	Recurrent dislocation	Neurological complication	infection
SFA 2015			
Global serie	0,8 %	0,8 %	2 %
@Latarjet	0,5 %	1,4 %	1 %
Latarjet open	0 %	0 %	1 %
Endo Bouton	3 %	0 %	0 %



SERIES # I : 390 cases

- There is no significant difference between Open and @
- Latarjet procedure @ or open provides a stable shoulder
- @ : less pain
- Evolution different but results similars
- Time for fully recovery : 1 year



But it is a difficult procedure
 What we should avoid !!



Coracoid bone **too lateral**
 Coracoid **too medial**
 Screw **too proud too long**
too oblique too high

Supra scapular nerve lesion (open / @ : Malorientation screw)

Cases reports



Screw **coraco glenoid notch**
 Screw **spino glenoid Notch**

GJ Maquieira et al JSES March/April 2007 open
S Sastre E Calvo et al KSSTA may 2014 @

Conclusion #2

- *Advantages of double cortical button with compression device*
 - # to pull the coracoid block from ant to post
 - # to avoid medial portal
 - # stable fixation with no rotation (2)
 - # No proud hardware



Conclusion #3

- *Go to the laboratory of anatomy* before to start on the patient
 - to decrease potential complications
 - to shorten learning curve
- *Check the proximity of the brachial plexus and terminal branches*
- *External rotation of the scapula to move inside the axillary N*
- *Level Subscapularis split* (1/3 sup and 1/3 middle)

Thank you for your attention


