

Shoulder SLAP

Research

CHRISTOPHER S. AHMAD, MD
CHIEF, SPORTS MEDICINE
HEAD TEAM PHYSICIAN NEW YORK YANKEES

Shoulder Instability and Labral Repairs are Greatly Enhanced with New Double-Row Repair Strategies

Athletes with superior labral tear from anterior to posterior (SLAP) lesions place large demands on their rotator cuff and often have partial articular-sided rotator cuff tears as part of an internal impingement process. These SLAP tears often compromise ability to throw or engage in sports and require surgery. Dr. Christopher Ahmad innovated a surgical technique that is minimally invasive, enhances recovery, and maximizes results. It

is especially useful in the highest demand athletes. The technique is percutaneous and facilitates SLAP repair may decrease the rotator cuff morbidity associated with establishment of the standard techniques.

The current study reports the clinical outcome of patients with SLAP lesions treated with a percutaneous repair technique. Twenty-two patients with SLAP lesions

underwent percutaneous repair. Mean patient age was 26.9 years. Standard posterior viewing and anterior working portals were used. Anchor placement and suture passing were performed with a 3-mm percutaneous and transtendinous approach to the superior labrum. Mean follow-up was 31.1 months (± 6.6 months). Improvement of shoulder evaluation scores from pre- to postoperative were as follows: American Shoulder



Christopher S. Ahmad, MD

Dr. Christopher Ahmad studied mechanical engineering at Columbia University setting a foundation to become an expert in shoulder injuries. He is the Chief of the Sports Medicine Service and the Head Team Physician for the New York Yankees. He has been researching and performing shoulder instability surgery, SLAP repairs, and labral repairs for 15 years. He has published over 100 articles related to labral tears and shoulder instability and is referred elite athletes and patients with the most complex injuries or failed surgery on a regular basis. He has become well known for pioneering the most advanced surgical techniques for collision and throwing athletes.

Applying Research to Improve Patient Outcomes

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and Elbow Surgeons score improved from 49.5 to 83.6 and Simple Shoulder Score improved from 6.4 to 11.0. All were significant improvements ($P < .05$). Ninety percent of athletes were able to return to sport at pre-injury level of function.

Percutaneously-assisted arthroscopic SLAP lesion repair may minimize surgical morbidity to the rotator cuff and provides excellent results.

CLINICAL RESEARCH

Galano GJ, Ahmad CS, et al: Percutaneous SLAP lesion repair technique is an effective alternative to portal of Wilmington. Orthopedics. 2010

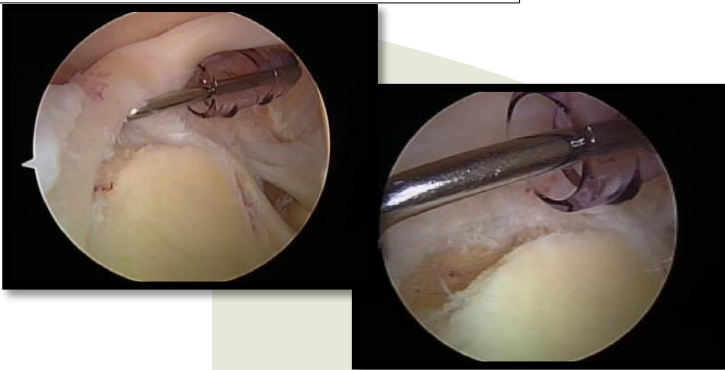


Figure 1: SLAP tear in a throwing athlete.



Figure 2: Percutaneous repair with minimal damage to rotator cuff tear.

To see more research or watch a video of labral repair being performed by Dr. Christopher Ahmad, please go to www.ChrisAhmadMD.com

Christopher S. Ahmad, MD

www.ChrisAhmadMD.com

Tel: 212-305-5561

Appt: 212-305-5561

Fax: 212-305-4040