Arthroscopic Treatment of Slap Lesions of Shoulder
(A Short-Term Follow-up)

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Abstract

Background: The superior labral lesion causes shoulder pain, disability, and severe dysfunction. These lesions can see separated or with rotator cuff tear. The pain and recurrent instability require surgical repairing. The purpose of this study was to evaluate the results of arthroscopic surgery of superior labral lesion of the shoulder.

Methods: In a case series study, we evaluated 29 patients (23 men, 6 women, mean age=26 years, range: 19-36 years) at a mean 31 months (12-47 months) following arthroscopic surgery of superior labral lesion of the shoulder. The outcome of treatment was evaluated with the University of California-Los Angeles Shoulder Scale (UCLA). 13 patients were involved in athletic activities, 7 of which in "overhead" sports and one contact sport. 8 patients had type I, 17 type II, 3 type III, and 1 patient type IV of slap lesions. The treatment included debridment for type I, debridment and decortication of glenoid and anchor suture in type II, debridment and excision of labral tear in type 3 and, excision and anchor suture of labral tear in type IV.

Results: Surgery of the superior labral lesion resulted in satisfactory UCLA score. 19 regained their preinjury level of shoulder function. The shoulder score and the return to activity were correlated with the type of sports activity. The patients participating in overhead sports had significantly lower shoulder scores and a lower percentage of return to their preinjury level of shoulder function compared with patients who were not engaged in overhead activity.

Conclusion: Arthroscopic surgery of superior labral is successful in the majority of patients but less satisfactory in those doing "overhead" sports. However, the result in patient who participates not involved in overhead sports.

Keywords: Shoulder; Arthroscopy; Joint capsule

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