



## Original Article

# Evaluation of the results from arthroscopic surgical treatment of rotator cuff injuries in patients aged 65 years and over<sup>☆</sup>



Alberto Naoki Miyazaki<sup>\*</sup>, Luciana Andrade da Silva, Pedro Doenux Santos, Sergio Luiz Checchia, Carina Cohen, Taís Stedile Busin Giora

Faculdade de Ciências Médicas da Santa Casa São Paulo, São Paulo, SP, Brazil

## ARTICLE INFO

## Article history:

Received 25 April 2014

Accepted 7 July 2014

Available online 16 June 2015

## Keywords:

Rotator cuff

Arthroscopy

Elderly people

## ABSTRACT

**Objectives:** To evaluate the results from arthroscopic surgical treatment of rotator cuff injuries in patients aged 65 years and over.

**Methods:** Between 1998 and 2009, 168 patients underwent operations. Five cases were excluded. The remaining 163 patients were stratified according to their age group: 65–69 years (49.1%), 70–74 (26.4%) and 75 years and over (24.5%). Their mean age was 71 years (range: 65–83). There were 63 male patients (38.7%). The mean length of time with pain, from the onset of symptoms to the surgery, was 23 months (range: 2 days to 240 months). Sixty-two patients (38%) reported histories of trauma and 26 (16%) reported that their pain worsened through exertion.

**Results:** From the UCLA criteria, 80.4% of the results were excellent, 16% good, 1.8% fair and 1.8% poor. Complications occurred in 11%. The final clinical result did not show any correlation with age progression, injury size or tendons affected. However, there was a significant association ( $p < 0.001$ ) between the presence of trauma and larger injuries. The length of time between the onset of symptoms and the surgical procedure had a significant relationship ( $p < 0.027$ ) with the postoperative results: the longer this time was, the worse the results were.

**Conclusion:** Arthroscopic treatment of rotator cuff injuries in patients aged 65 years and over presented excellent and good results in 96.4% of the cases, according to the UCLA assessment, with a low complication rate. Advanced age did not show any influence on the postoperative clinical evolution, but the earlier the surgical treatment was instituted, the better the results were.

© 2014 Sociedade Brasileira de Ortopedia e Traumatologia. Published by Elsevier Editora Ltda. All rights reserved.

<sup>☆</sup> Work developed in the Shoulder and Elbow Group, Department of Orthopedics and Traumatology, Faculdade de Ciências Médicas da Santa Casa São Paulo, Fernandinho Simonsen Wing (DOT – FCMSCSP).

<sup>\*</sup> Corresponding author.

E-mail: [amiyazaki@uol.com.br](mailto:amiyazaki@uol.com.br) (A.N. Miyazaki).

<http://dx.doi.org/10.1016/j.rboe.2015.06.001>

2255-4971/© 2014 Sociedade Brasileira de Ortopedia e Traumatologia. Published by Elsevier Editora Ltda. All rights reserved.

## Avaliação dos resultados do tratamento cirúrgico artroscópico das lesões do manguito rotador em pacientes com 65 anos ou mais

### R E S U M O

**Palavras-chave:**  
Manguito rotador  
Artroscopia  
Idoso

**Objetivos:** Avaliar os resultados do tratamento cirúrgico por via artroscópica nas lesões do manguito rotador (LMR) de pacientes com 65 anos ou mais.

**Métodos:** Entre 1998 e 2009 foram operados 168 pacientes. Cinco casos foram excluídos. Os 163 pacientes foram estratificados de acordo com a faixa etária de 65 a 69 (49,1%), 70 a 74 (26,4%) e acima de 75 (24,5%). A média foi de 71 anos (65 a 83). Eram do sexo masculino 63 pacientes (38,7%). A média de tempo de dor (início dos sintomas) até a cirurgia foi de 23 meses (2d–240m). Referiram história de trauma 62 pacientes (38%) e 26 (16%) algum esforço com pioria da dor.

**Resultados:** Pelos critérios da Universidade da Califórnia em Los Angeles (UCLA) tivemos 80,4% de excelentes resultados, 16% bons, 1,8% regular e 1,8% ruim. Tivemos 11% de complicações. O resultado clínico final não mostrou correlação com a progressão da idade, o tamanho da lesão ou os tendões acometidos. Mas existe uma associação significativa ( $p < 0,001$ ) entre a presença de trauma e lesões maiores. O tempo entre o início dos sintomas e o procedimento cirúrgico mostra uma relação significativa ( $p < 0,027$ ) com os resultados pós-operatórios: quanto maior, piores os resultados.

**Conclusão:** O tratamento artroscópico da LMR em pacientes com 65 anos ou mais apresentou resultados excelentes e bons em 96,4% quando avaliados pelo UCLA, com baixa taxa de complicações. A idade avançada não demonstrou influência na evolução clínica pós-operatória. Entretanto, quanto mais precocemente o tratamento cirúrgico for instituído, melhores os resultados.

© 2014 Sociedade Brasileira de Ortopedia e Traumatologia. Publicado por Elsevier Editora Ltda. Todos os direitos reservados.

## Introduction

Rotator cuff injuries are very common in orthopedic practice, with prevalence between 5% and 33%. They frequently occur in the elderly population<sup>1,2,3,4</sup> and reach 22% among patients over the age of 65 years.<sup>5</sup> Individuals over the age of 50 years are more commonly affected by chronic injuries of greater severity as a result of the degenerative process, while the young population (<40 years) has injuries that are predominantly of traumatic etiology.<sup>1,6</sup>

While some authors have demonstrated good results regarding improvement of pain, function and quality of life through conservative methods<sup>7,8</sup> or through surgical treatment, including by means of acromioplasty and debridement alone,<sup>9,10</sup> others have argued that surgical repair of rotator cuff injuries leads to better and longer-lasting results.<sup>2,3,4,11</sup> Performing surgical procedures on elderly people may be a challenge. In 1995, Hatstrup and Scottsdale<sup>2</sup> suggested that patients aged 65 years or over present a significant chance of having larger lesions, which potentially adds difficulty to their repair. The bone quality is lower and this results in osteoporosis of the greater tubercle, subchondral cystic degeneration and irregularity of the cortical bone, and it may complicate anchor fixation. Furthermore, elderly people frequently present comorbidities (diabetes mellitus, rheumatoid arthritis or renal diseases), which may diminish the healing response and compromise surgical management.<sup>12</sup>

The long period between the initial presentation of symptoms and the time when arthroscopic surgical repair of the rotator cuff injury is performed is a negative prognostic factor for the clinical results.<sup>13</sup> In addition, the size of the lesion, retraction, fatty degeneration and the quality of the tendon also influence the healing.<sup>14,15</sup>

Some authors have believed that these patients' advanced age interferes with the healing of rotator cuff lesion suturing, such that young patients tend to have more favorable evolution. Nonetheless, arthroscopic repair on rotator cuff injuries in elderly people produces significant functional improvement and positive changes to quality of life,<sup>16–20</sup> with advantages in relation to open surgery and mini-open procedures, because of the small incision, absence of damage to the deltoid muscle, lower pain during the postoperative period and shorter hospital stay. Moreover, especially, it enables diagnosis and treatment of associated lesions through viewing the joint with minimal tissue trauma.<sup>21–23</sup> Thus, Charousset et al.<sup>15</sup> and Grondel et al.<sup>17</sup> suggested that age alone is unrelated to poor results from injury repairs.

The present study had the objective of evaluating the results from arthroscopic surgical treatment of rotator cuff lesions in patients aged 65 years or over.

## Sample and methods

A retrospective analysis was conducted on 168 shoulders in 163 patients aged 65 years or over who presented complete

Download English Version:

<https://daneshyari.com/en/article/2707955>

Download Persian Version:

<https://daneshyari.com/article/2707955>

[Daneshyari.com](https://daneshyari.com)