

De schouderpatiënt boven de 60 jaar: oud en versleten ?

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Changing Demands



De Degeneratieve Schouder



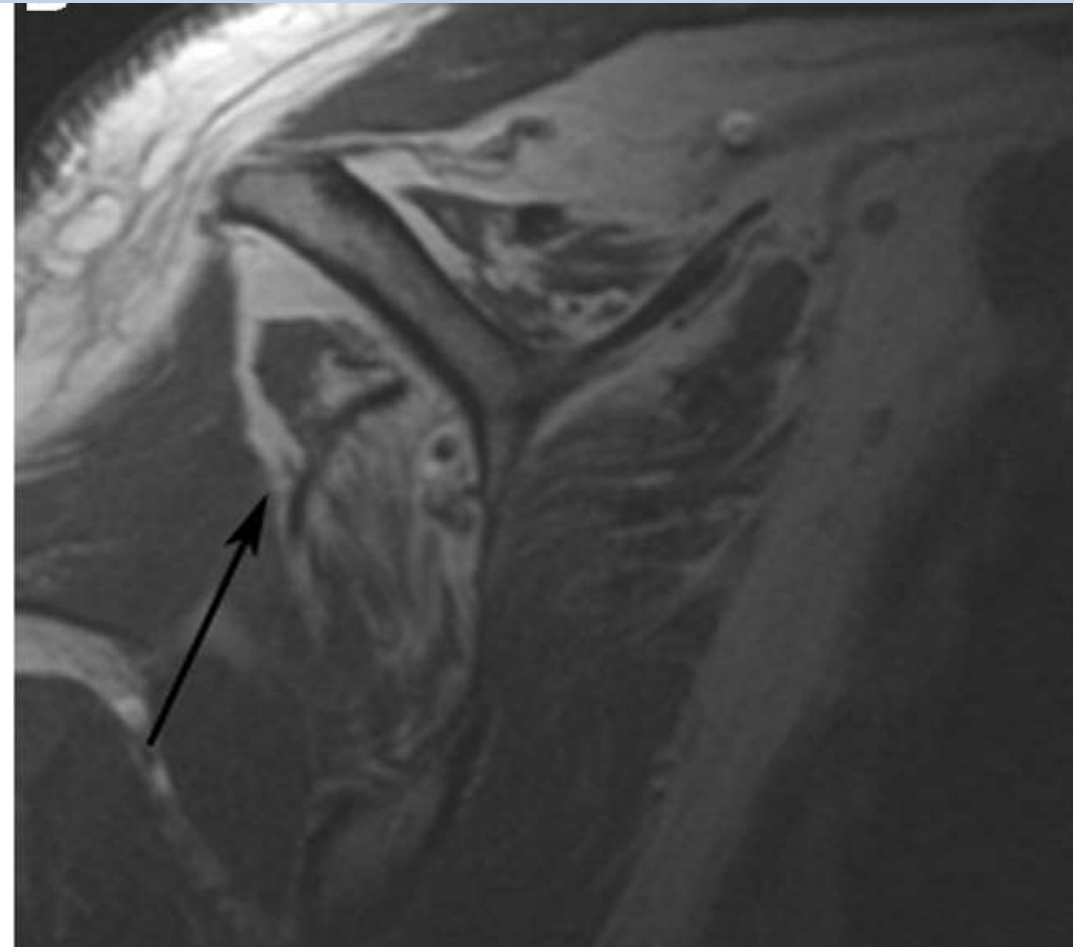
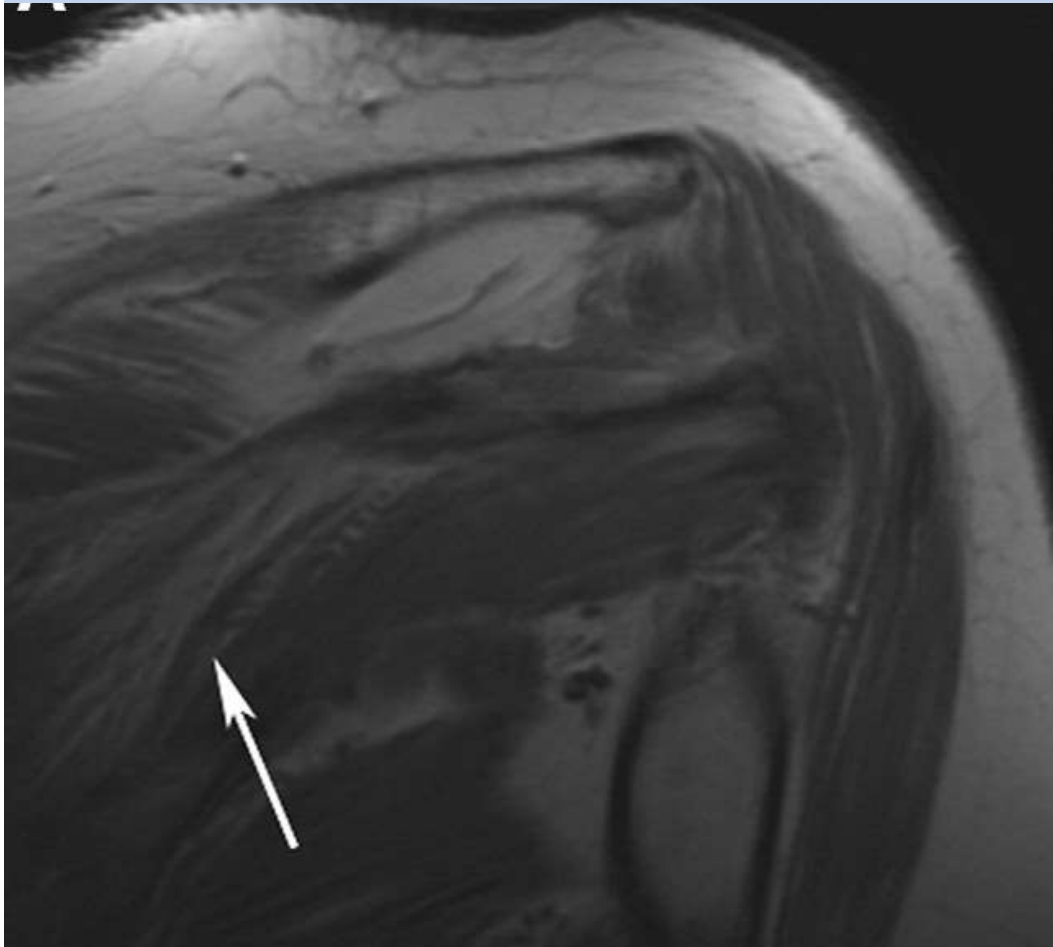
Glenohumerale
Arthrose



Irreparabele cuff
scheuren

Lipomateuze involutie en atrofie

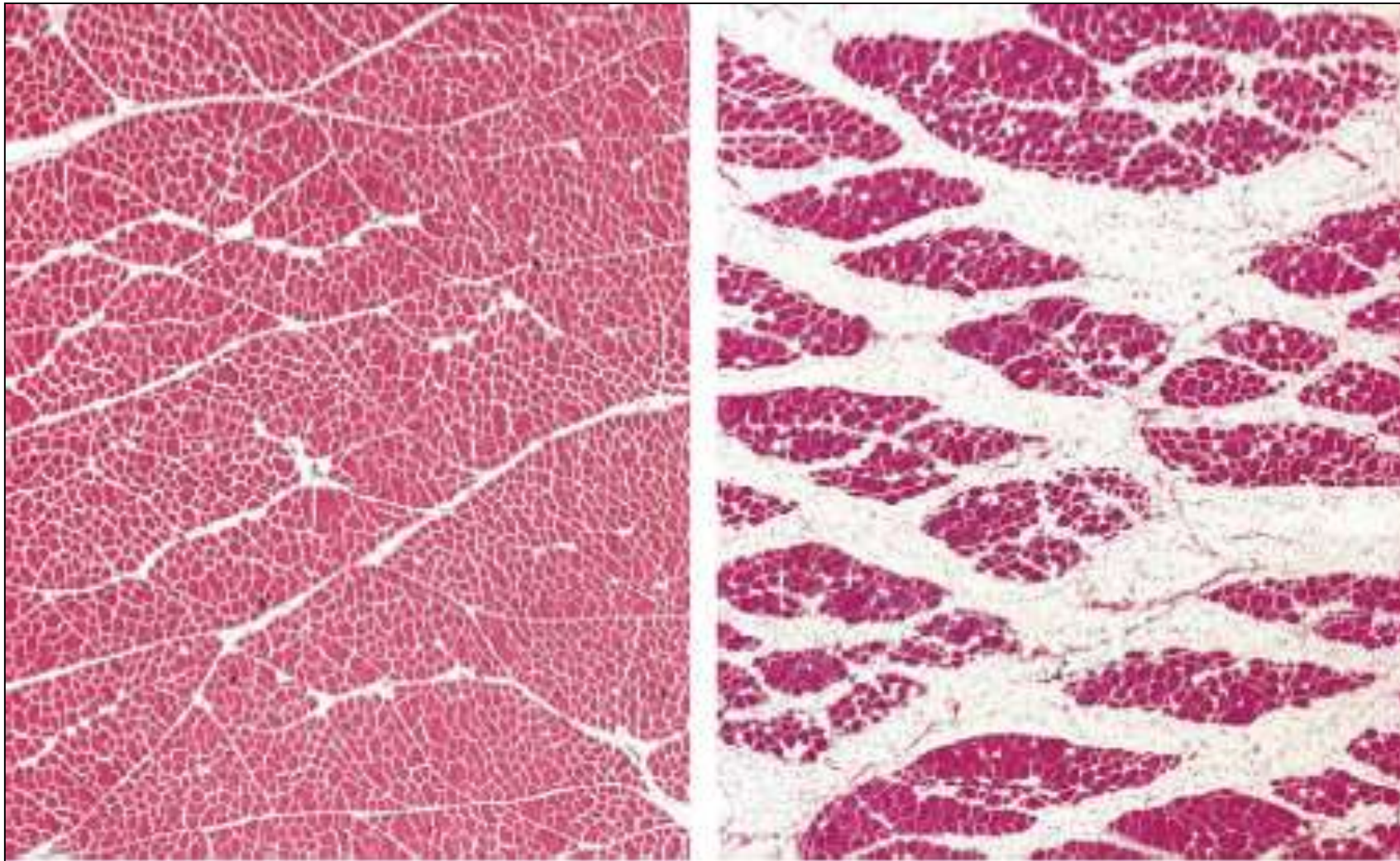
- Irreversibel proces, ondanks operatief peesherstel
- Correleert met slecht functioneel resultaat na heilkunde



Lipomateuze involutie

NORMAAL

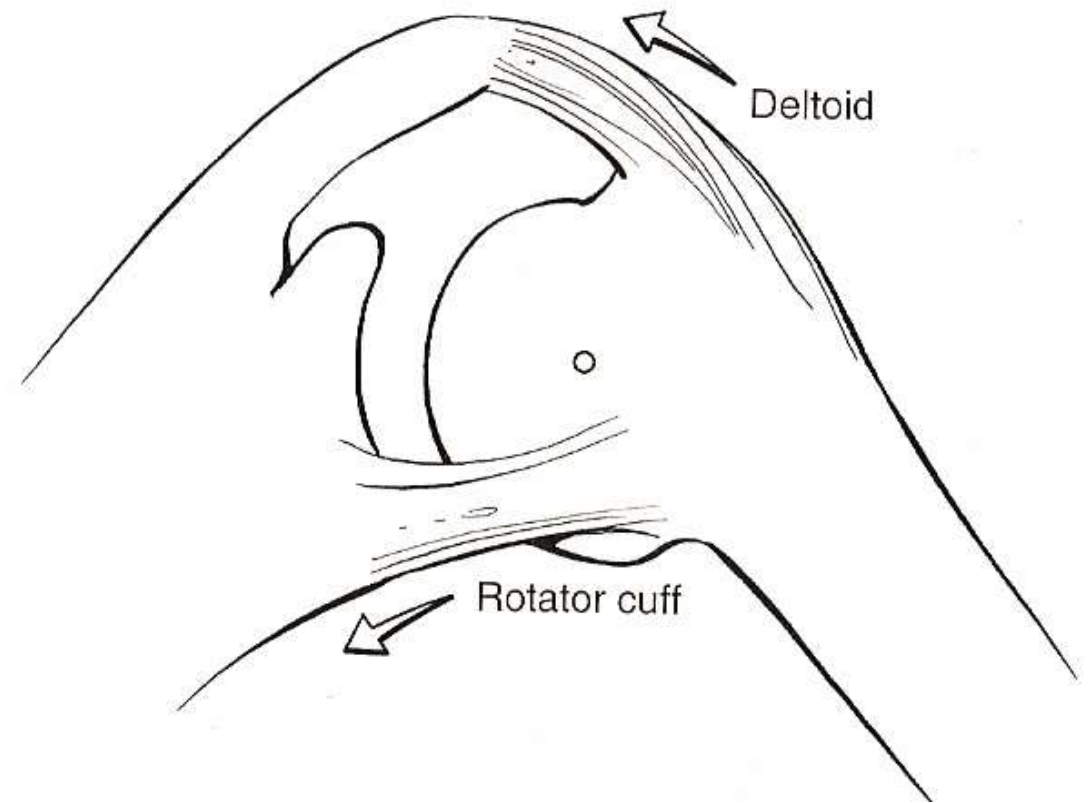
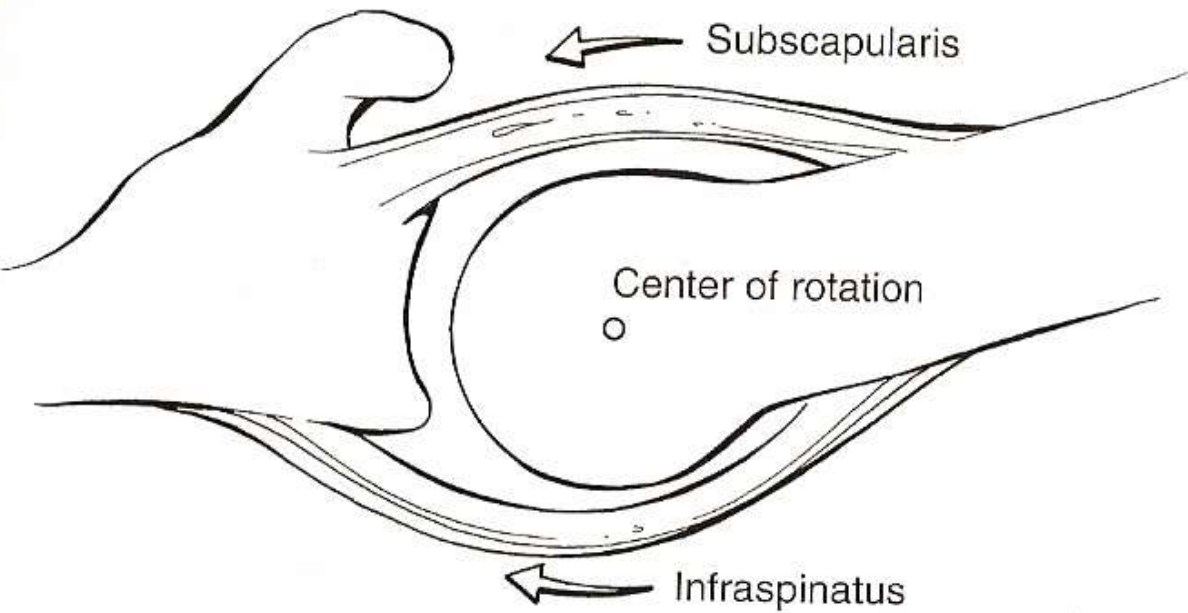
CHRONISCHE SCHEUR

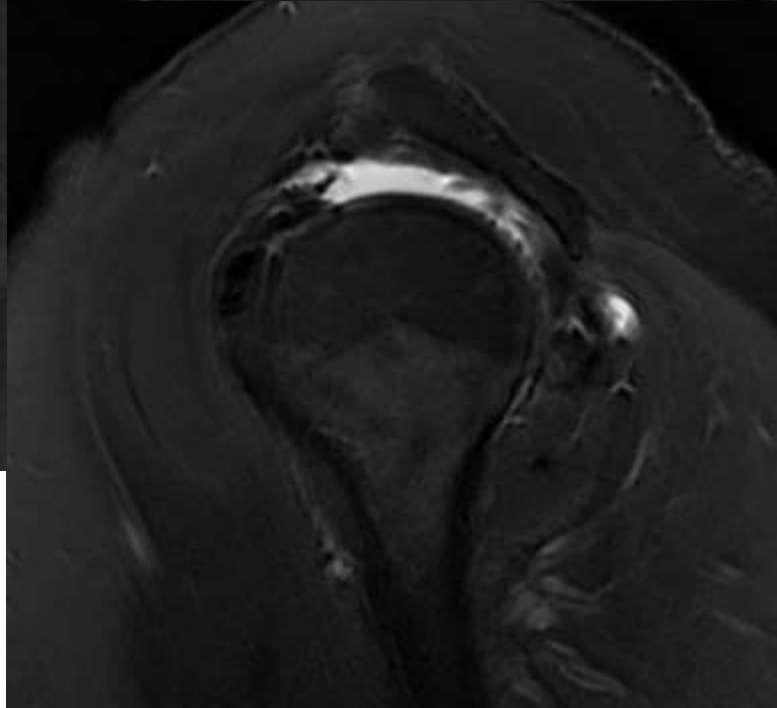
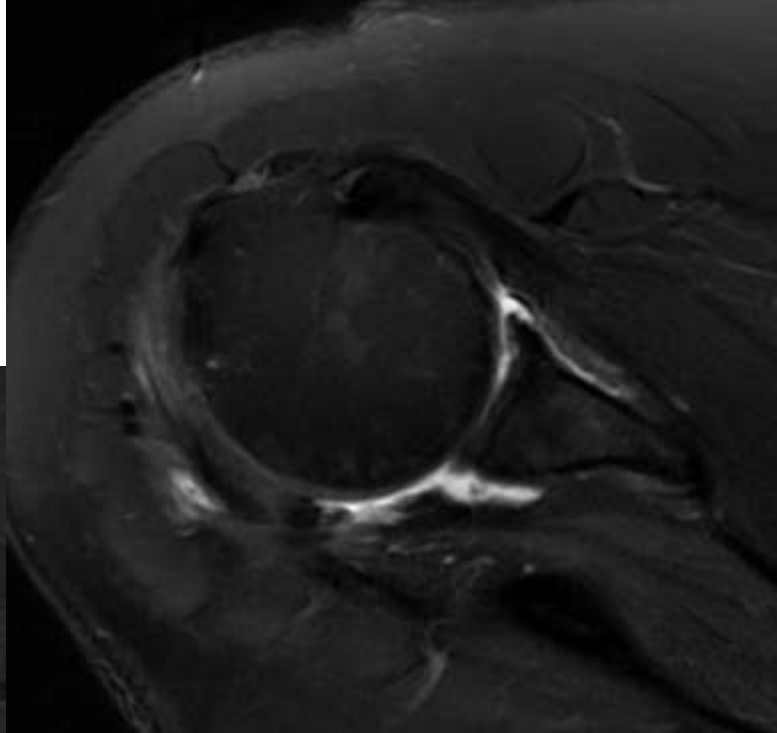
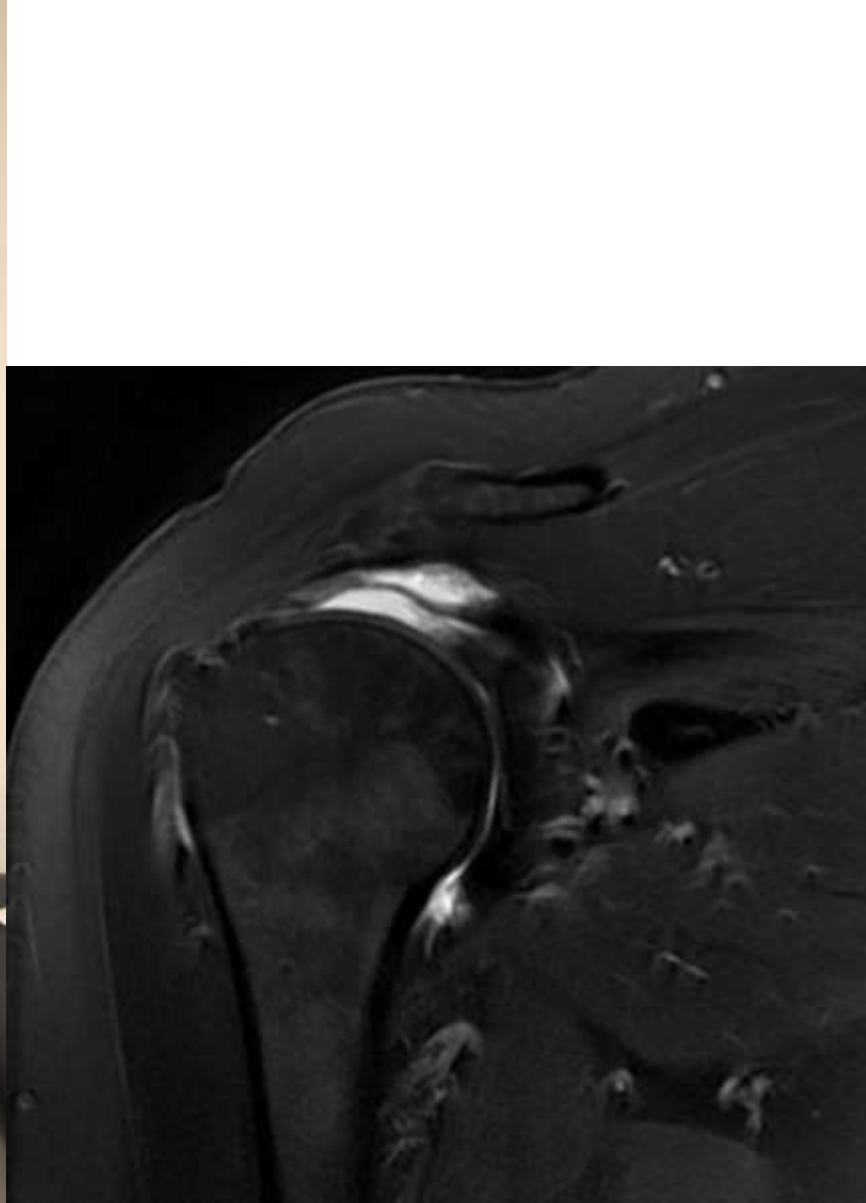


KLINISCHE SCENARIO'S



ROTATOR CUFF KRACHTENKOPPELS





Bicepstenotomie

- “Treat the biceps, ignore the cuff”

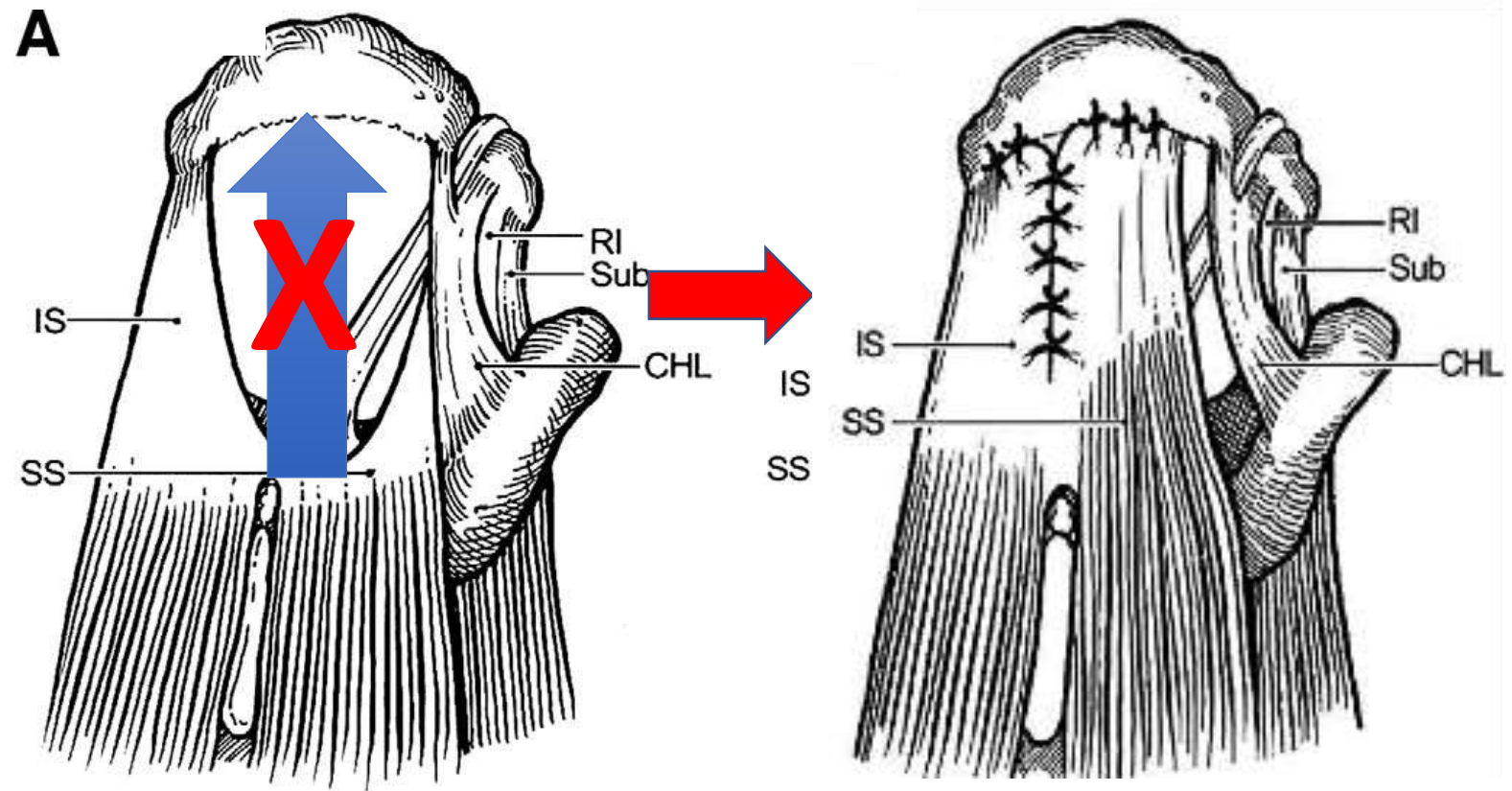
- Indicaties

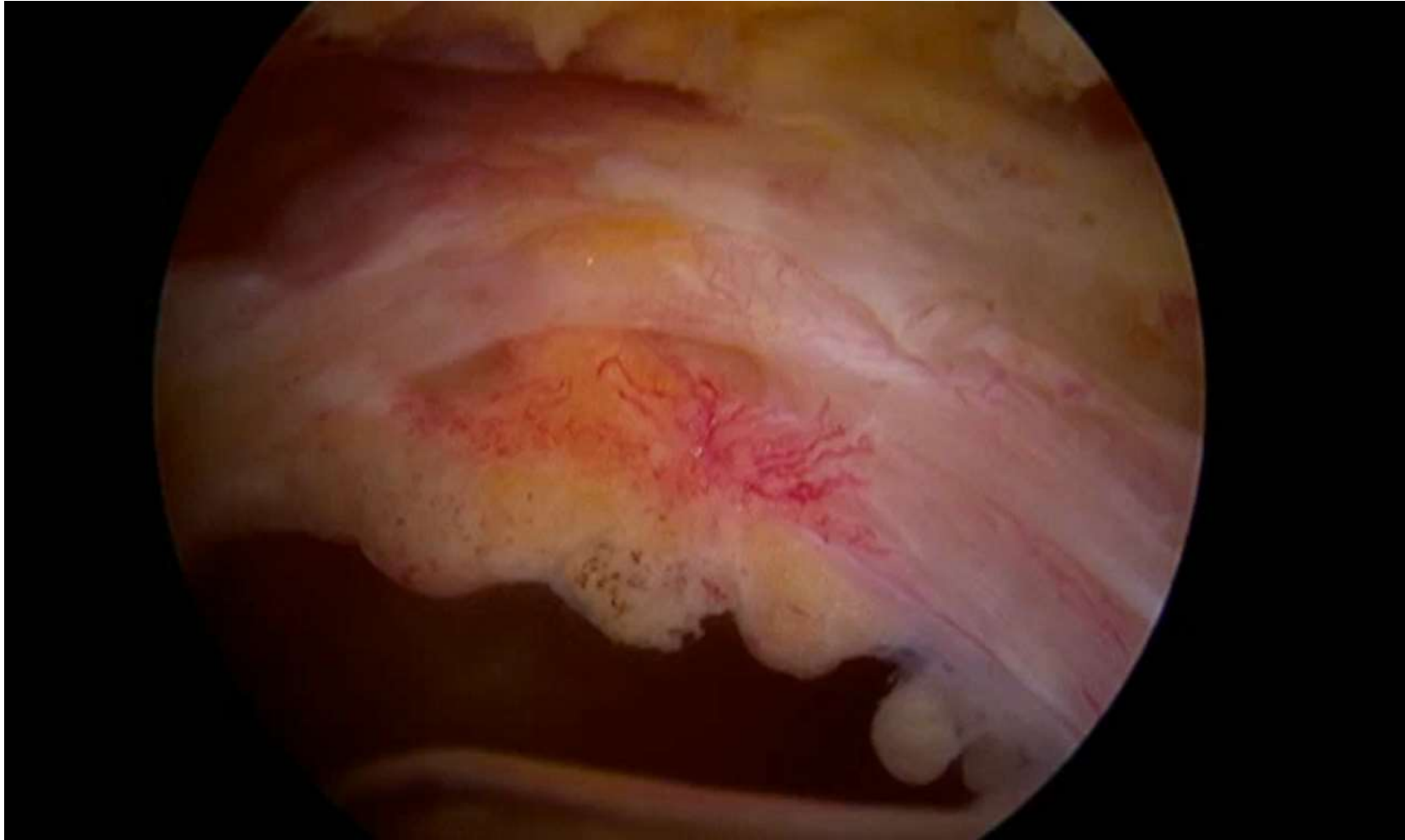
- Oudere patient, pijn ++
- Bewaarde functie
- Recuperatie kracht minder essentieel



Partieel Rotator Cuff Herstel

- Krachtswinst ?
 - Neen
- Omkeren atrofie ?
 - Neen
- **Rebalancing !!**
= Herstel van de krachtenkoppels





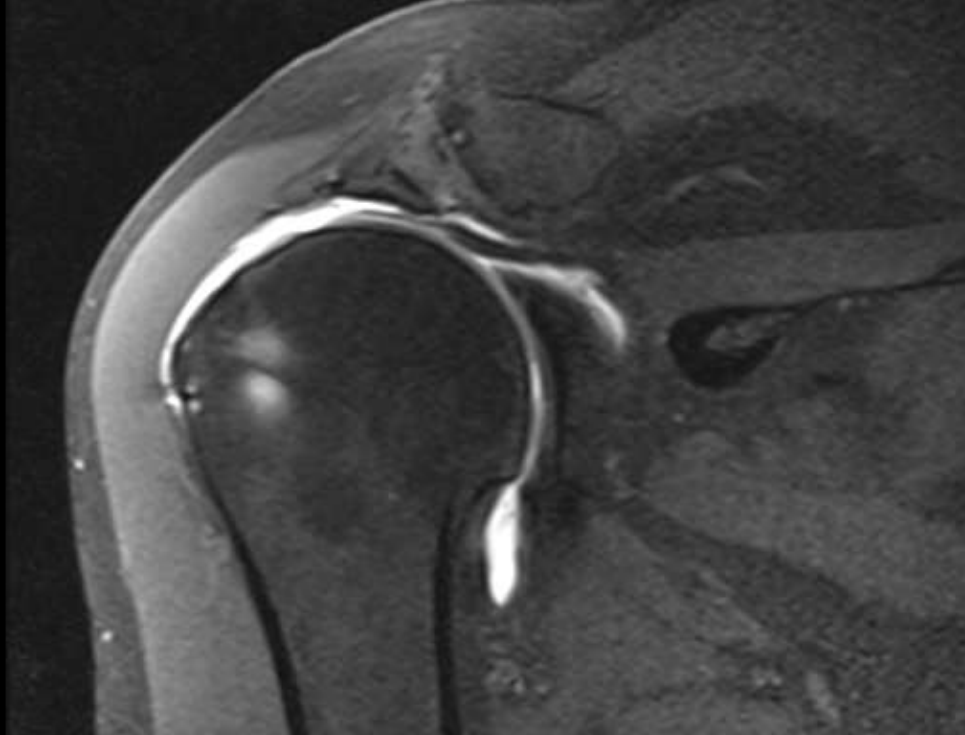
Se:3
Im:11

Study T
MR

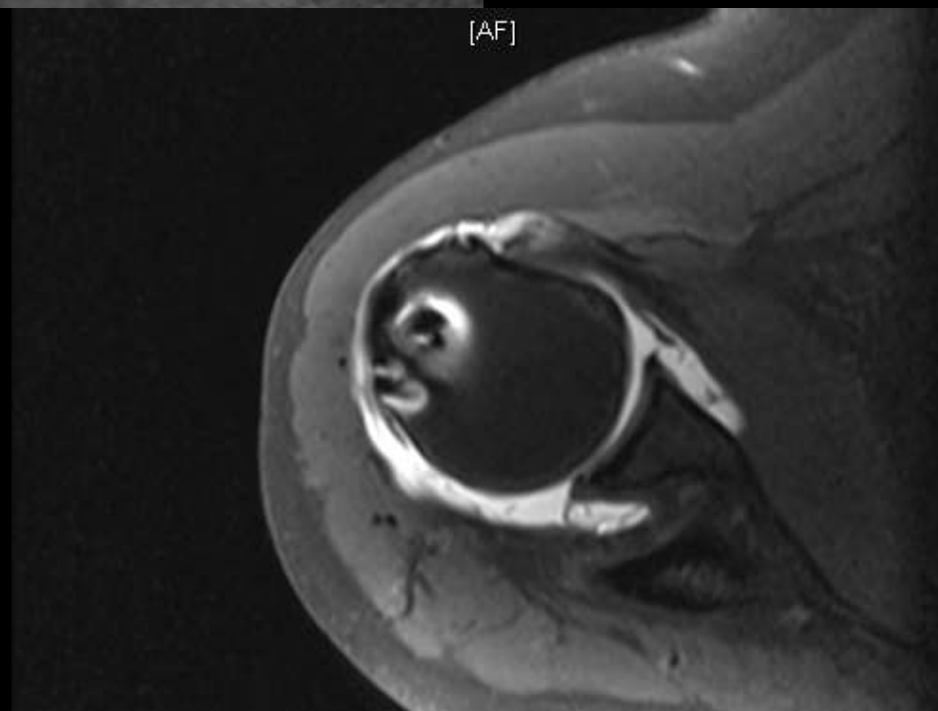


Se:7
Im:10

[RH]



[AF]



Scheur van of Ssp, Isp, (TM)

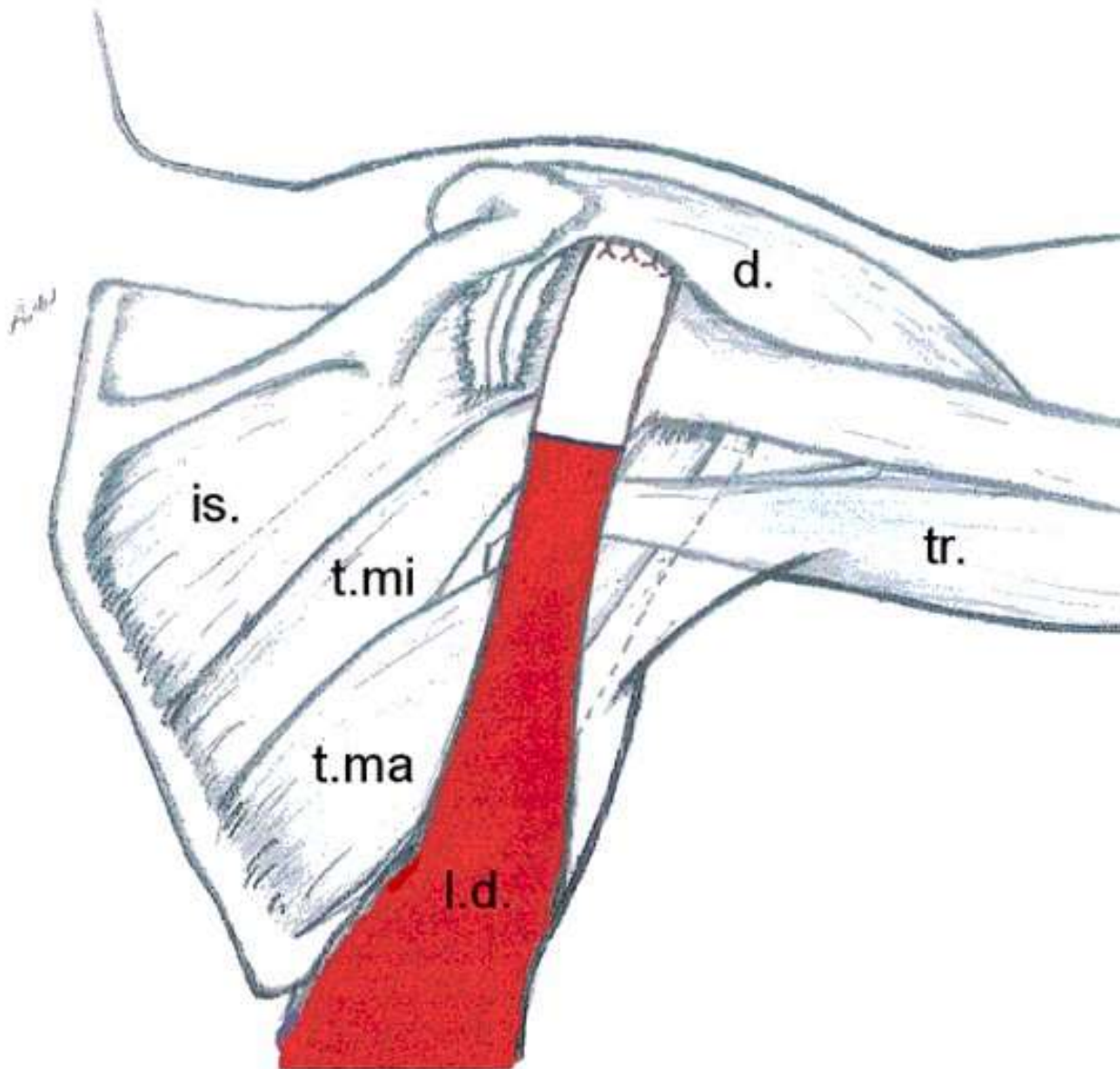
External Rotation

Lag Sign



Hornblower's sign

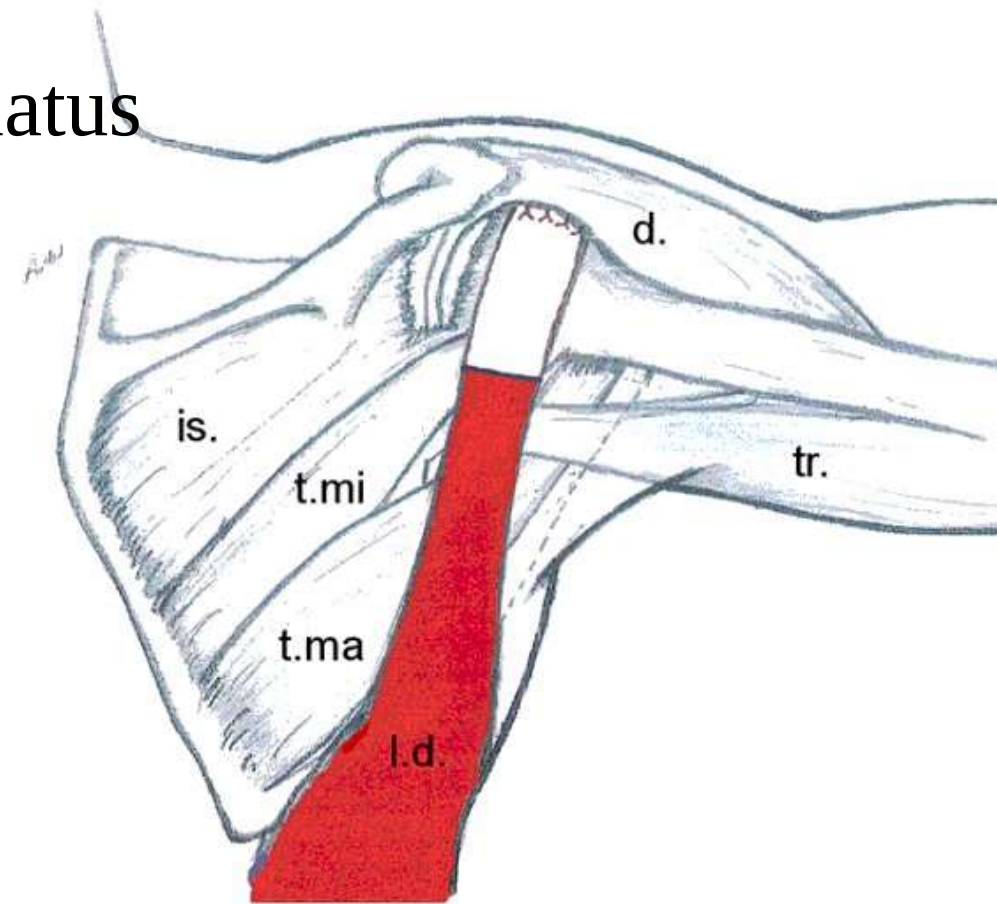
Latissimus dorsi transfer



Latissimus dorsi transfer

• Indicaties

- Leeftijd < 70 yr
- Irreparabele scheur supra + infraspinatus
- Intacte Subscapularis
- Pijn, Minimum 90° actieve elevatie
- Verlies van actieve exorotatie
 - EXTERNAL LAG / HORNBLOWER

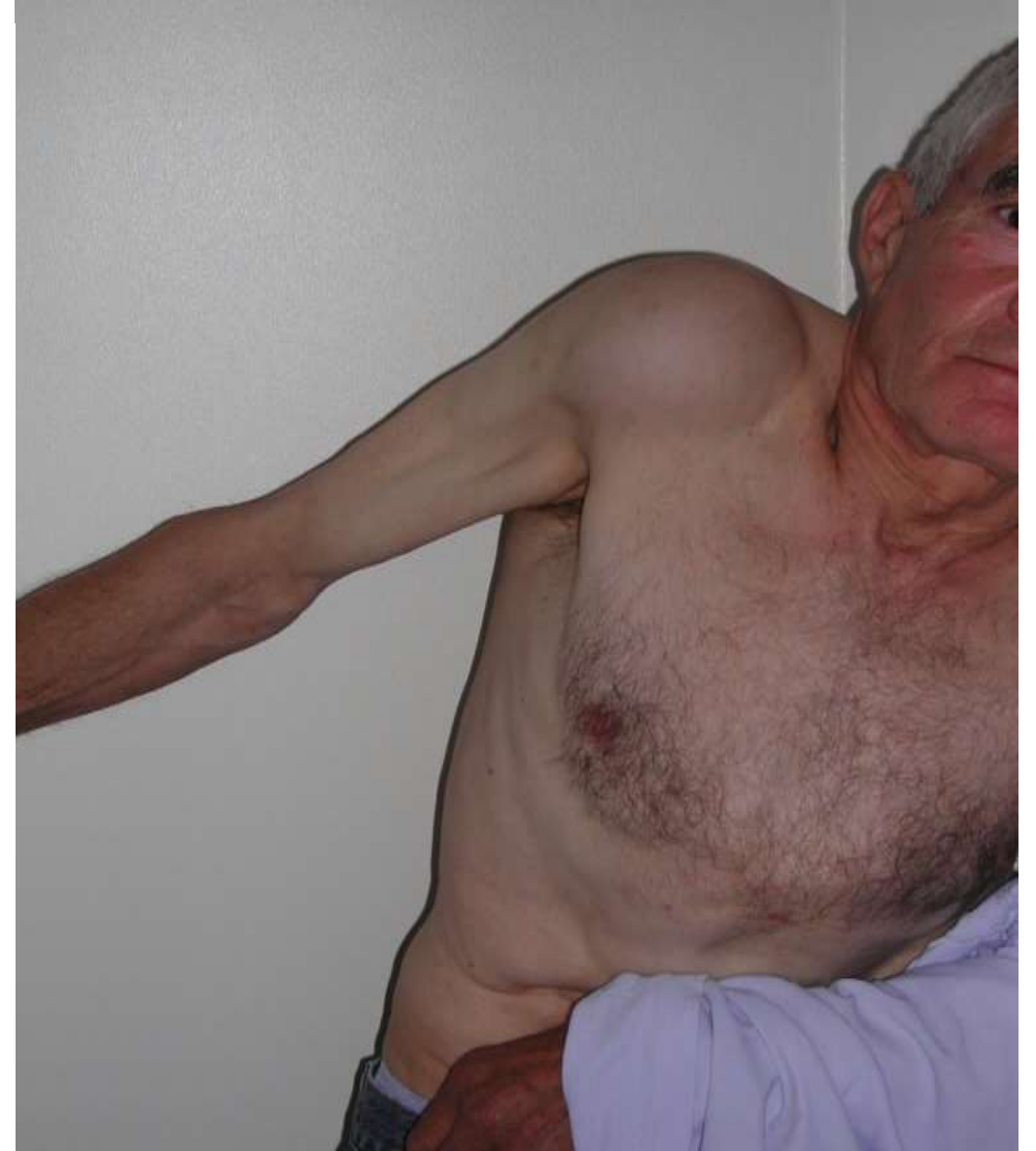
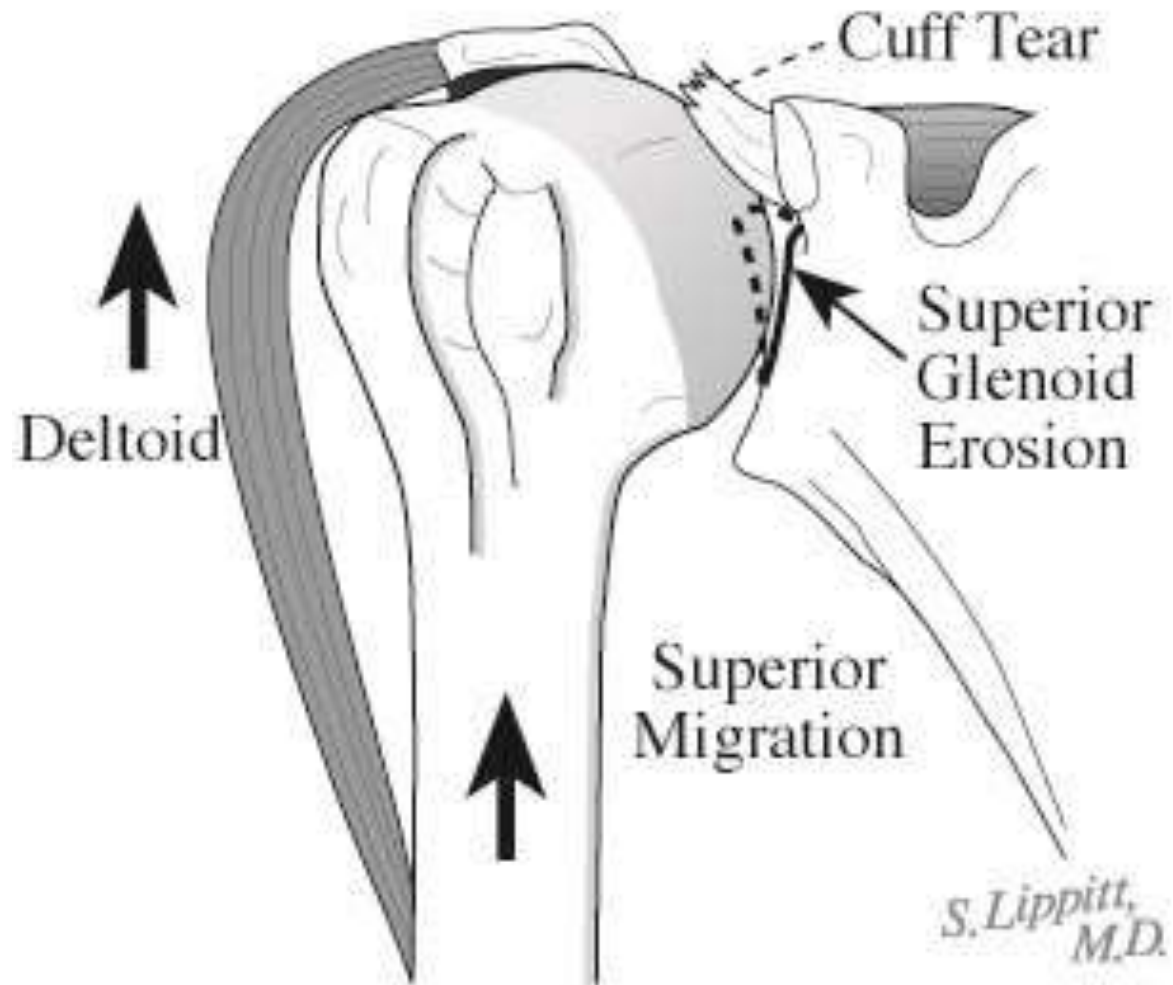


6 maanden





Superieure Migratie en Pseudoparalyse



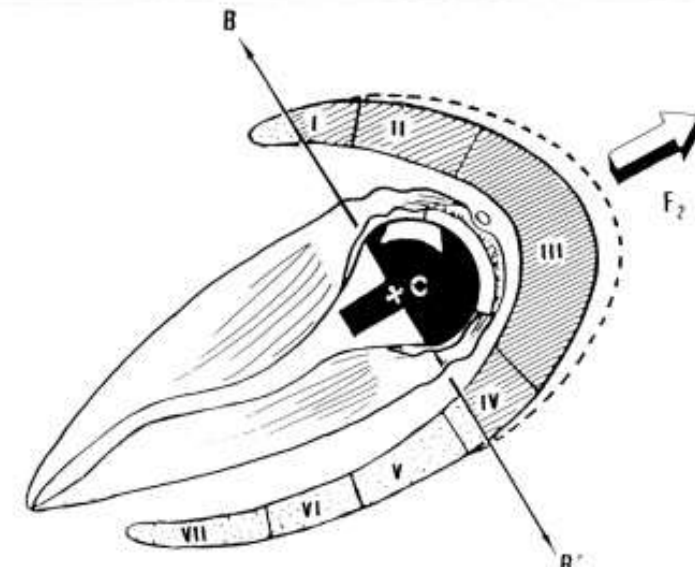
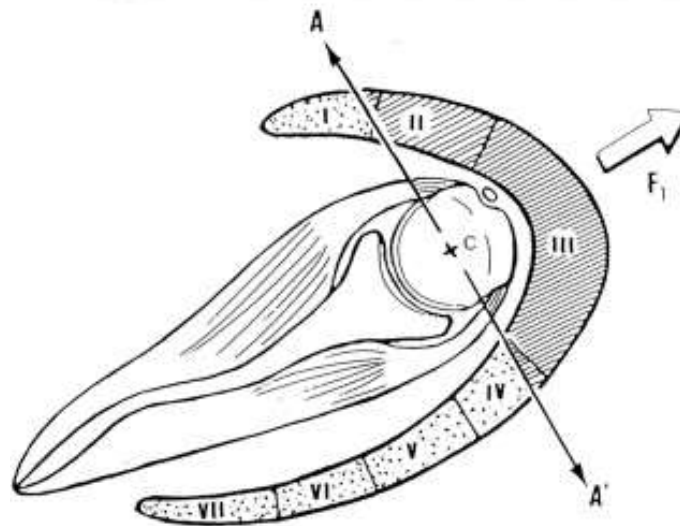
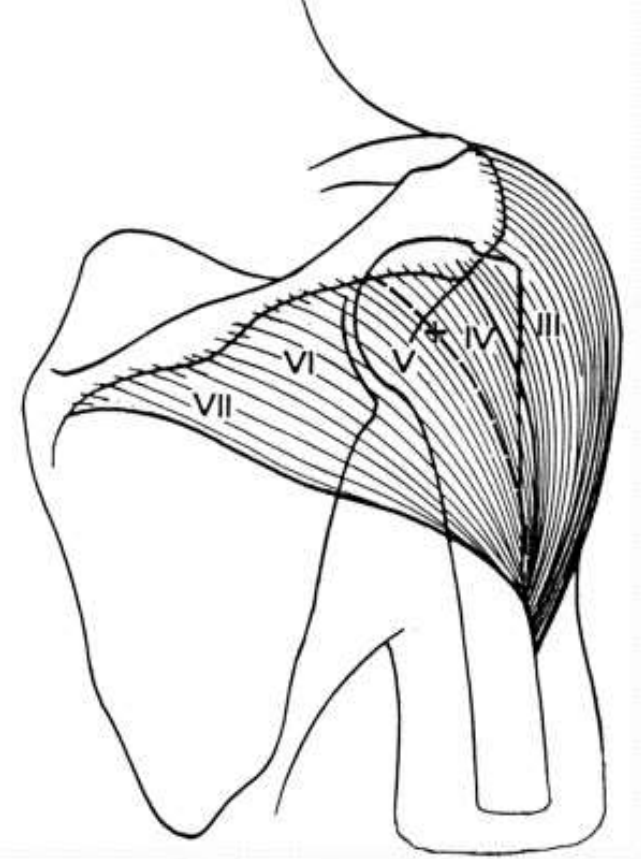
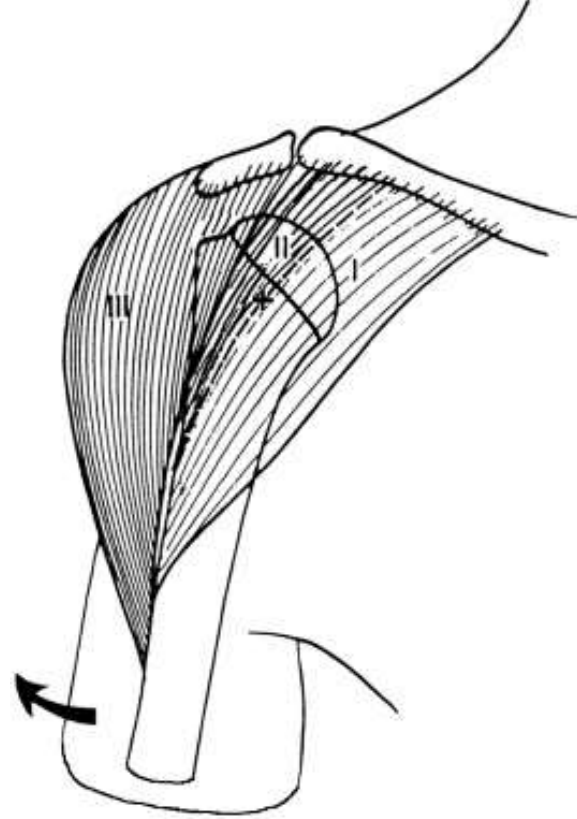
Reverse Shoulder Arthroplasty



Centrum van Rotatie
inferieur en mediaal



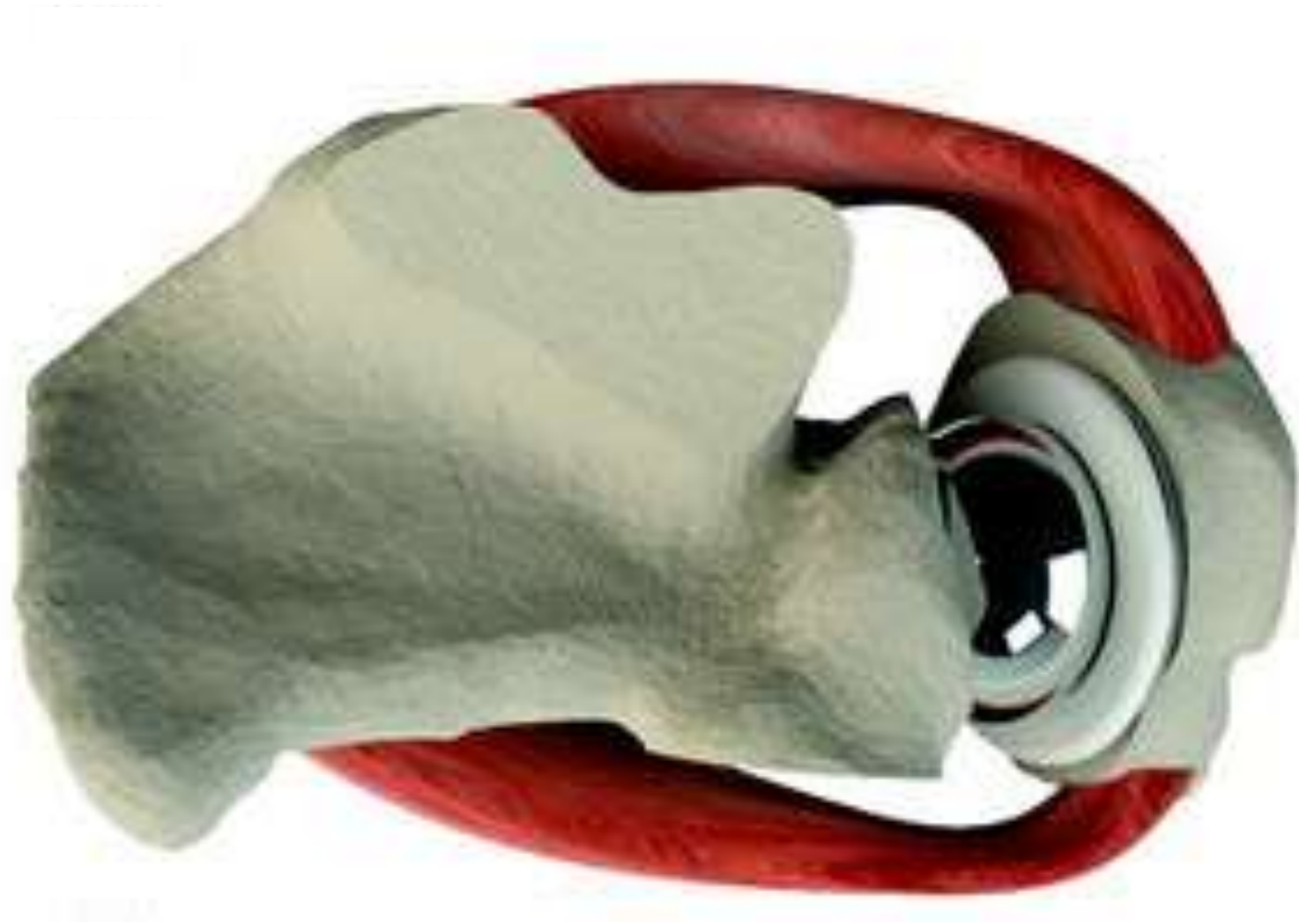
Verhoogde Deltoid functie
(50% meer kracht)



Centrum van Rotatie
inferieur en mediaal

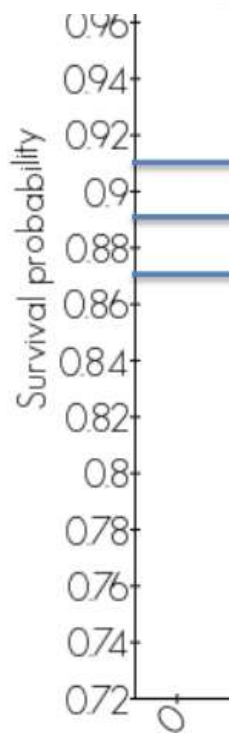


Verhoogde functie van
resterende rotator cuff
(vnl. IS/subscap)



RSA

N = 1953



Estimate
95% Confidence Limit
95% Confidence Limit

edStat.com

19 24

Techniek





Conclusies

- Degeneratieve cuff scheuren met lipomateuze involutie en atrofie zijn onherstelbaar
- Meerderheid doet het uitstekend met kinesithérapie en conservatief beleid
- Keuze van chirurgische alternatieven hangt af van klinisch (leeftijd, functie, pijn) en radiografische (retractie, atrofie) beeld

Conclusies



Pijn+, goede functie

➤ Arthroscopie

Pijn++, lag signs

➤ Peestransfers transfer

Pijn++, pseu-paralyse

➤ Reverse TSP

BELSS COURSE

SHOULDER **ARTHROPLASTY**

6/12/2019

Elisabeth Center Antwerp

| Live Surgery

| International & National faculty

| Course Chairman: O. Verborgt

