

Surgical Treatment Of A Glad-Lesion Of The Shoulder With ChondroFiller® Liquid

Schöllkopf, A., Färber L.-C., Hoppert M. - Orthopaedics and Trauma Surgery, ISAR Klinikum Munich, Munich, Germany



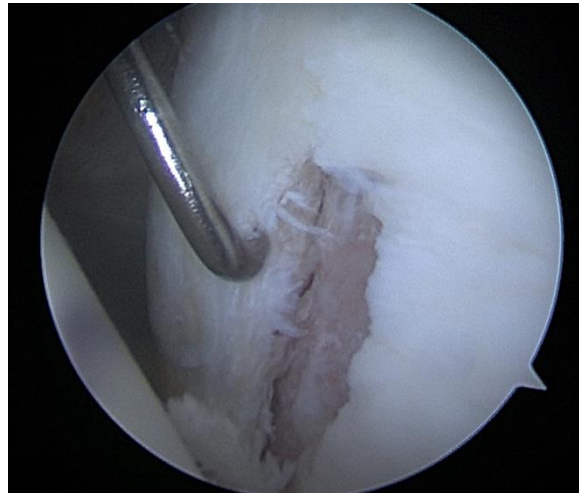
Purpose

Focal full-thickness lesions of the shoulder are less common than those of the lower extremity. There is still a significant controversy in selecting and refining successful operative techniques to repair symptomatic glenohumeral cartilage lesions in the shoulder of young active patients.

MR arthrography of the shoulder presented a GLAD lesion (Glenolabral Articular Disruption) with a focal full thickness chondral defect of the glenoid. The diagnosis was confirmed arthroscopically with severe delamination of the glenoid cartilage. The chondral flap was debrided and a stable chondral rim was created. Changing to a “dry” arthroscopy the chondral defect was filled with ChondroFiller® liquid.

Figure 1 (left): MRI of the patient with recognisable GLAD defect and accompanying bone marrow oedema

Figure 2 (below): Intraoperative arthroscopic image of the GLAD lesion



Results

At the follow up after 3 months the patient demonstrated a completely pain free shoulder with full ROM and normal muscle strength. He has returned to his prior high level sport activity. After 6 months an MRI was performed due to an affection of the AC joint. The restored articular surface of the glenoid was confirmed by shoulder arthroscopy.

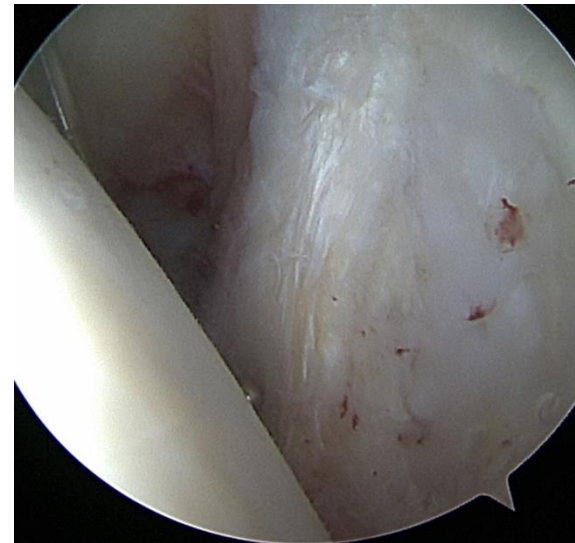


Figure 3 (above): Intraoperative arthroscopic image of the cartilage regenerate

Conclusion

Articular cartilage lesions of the glenohumeral joint are difficult to identify and to manage. The treatment of chondral injuries in the glenohumeral joint remains a challenging problem. Operative treatment options include palliative, reparative and restorative procedures. Little literature exists on the long term results. Treatment with ChondroFiller® liquid could be a safe single-stage solution performed with an all-arthroscopic technique. Future case-control studies are necessary in order to determine the true long-term efficiency of these procedures.

Keywords

Glad lesion; shoulder; transchondral defect

Methods

We present the case of a 45-year-old high level sport active male patient who underwent an abduction and external rotation trauma of the shoulder.