

New Approaches to Shoulder Surgery

Editorial Comment

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The shoulder is a fascinating joint. The combination of mobility and stability of the shoulder allows us to position the upper extremity in space so that we may accomplish a large variety of functions. A wide array of pathological entities affect the shoulder, ranging from arthritis to instability and including the rotator cuff, scapular muscles and other joints in addition to the glenohumeral articulation. This symposium reviews many of these challenging aspects of shoulder surgery.

Many of the advances from the past 10 to 20 years have been highlighted in this Symposium. For example, throwing athletes whose careers would have been ended due to shoulder problems can now return to play following surgery when no other options were previously available. On the other end of the spectrum, patients with cuff tear arthropathy with incapacitating pain and limited function may also be improved by reverse total shoulder arthroplasty. This

Symposium highlights an example where advances in regional anesthesia and ambulatory surgery have been applied to joint replacement surgery, allowing shoulder arthroplasty patients to go home the day of their surgery in a safe and effective manner. We have also included an example of our transition towards more arthroscopic-based procedures where a technique for arthroscopic coracoclavicular ligament reconstruction is described.

Despite the advances in our field, there remain many challenges. We include examples of these, including tendon to bone healing in rotator cuff surgery, difficulties associated with shoulder arthroplasty revision, challenges related to the technique of reverse shoulder arthroplasty, and complications related to shoulder surgery. While we have come a long way, there remains much room for progress, and hopefully this Symposium will contribute to further our knowledge and improve the care of our patients.

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