RAPID RESEARCH

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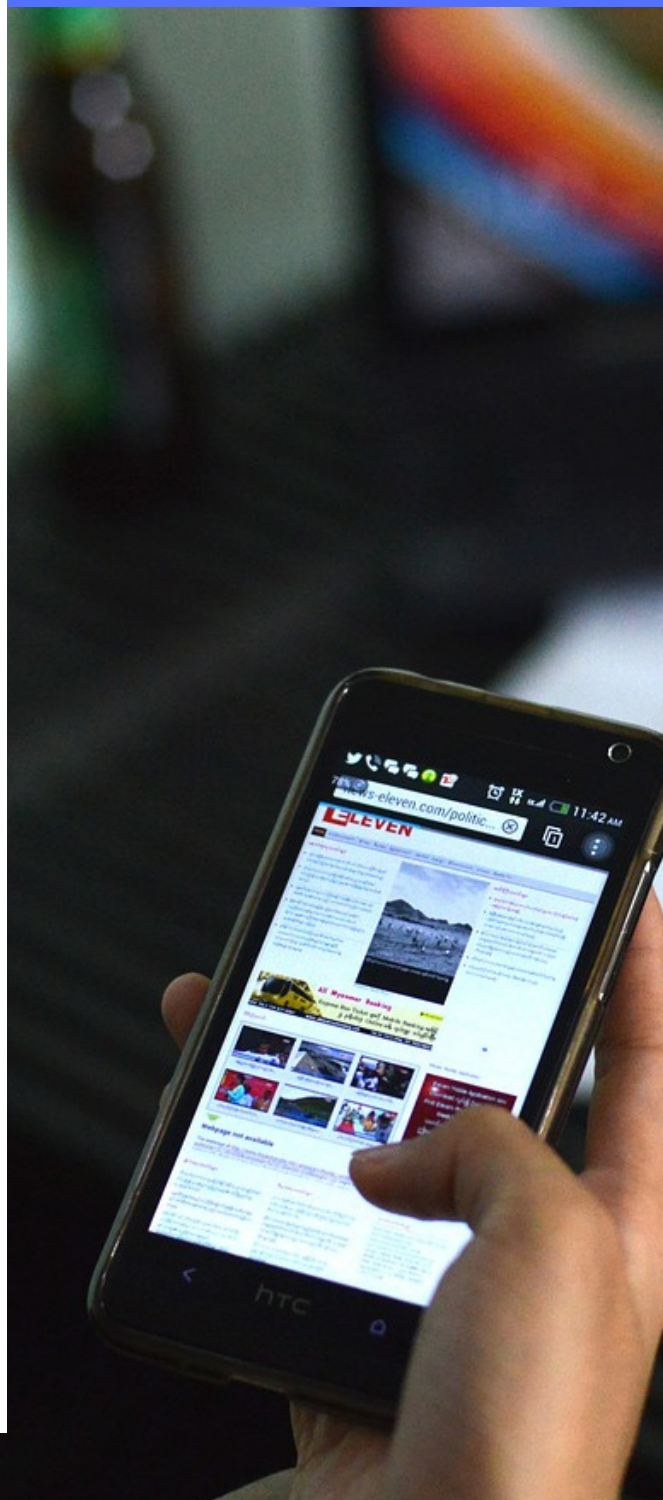
July 2021

Inside This Week:

All About the Shoulder Joint

- MRI Accuracy to Diagnose Rotator Cuff Partial Tears
- Subacromial Decompression Vs. Placebo Vs. Exercise
- Diagnosing SLAP Tears: MRA vs Special Tests



JULY 2021

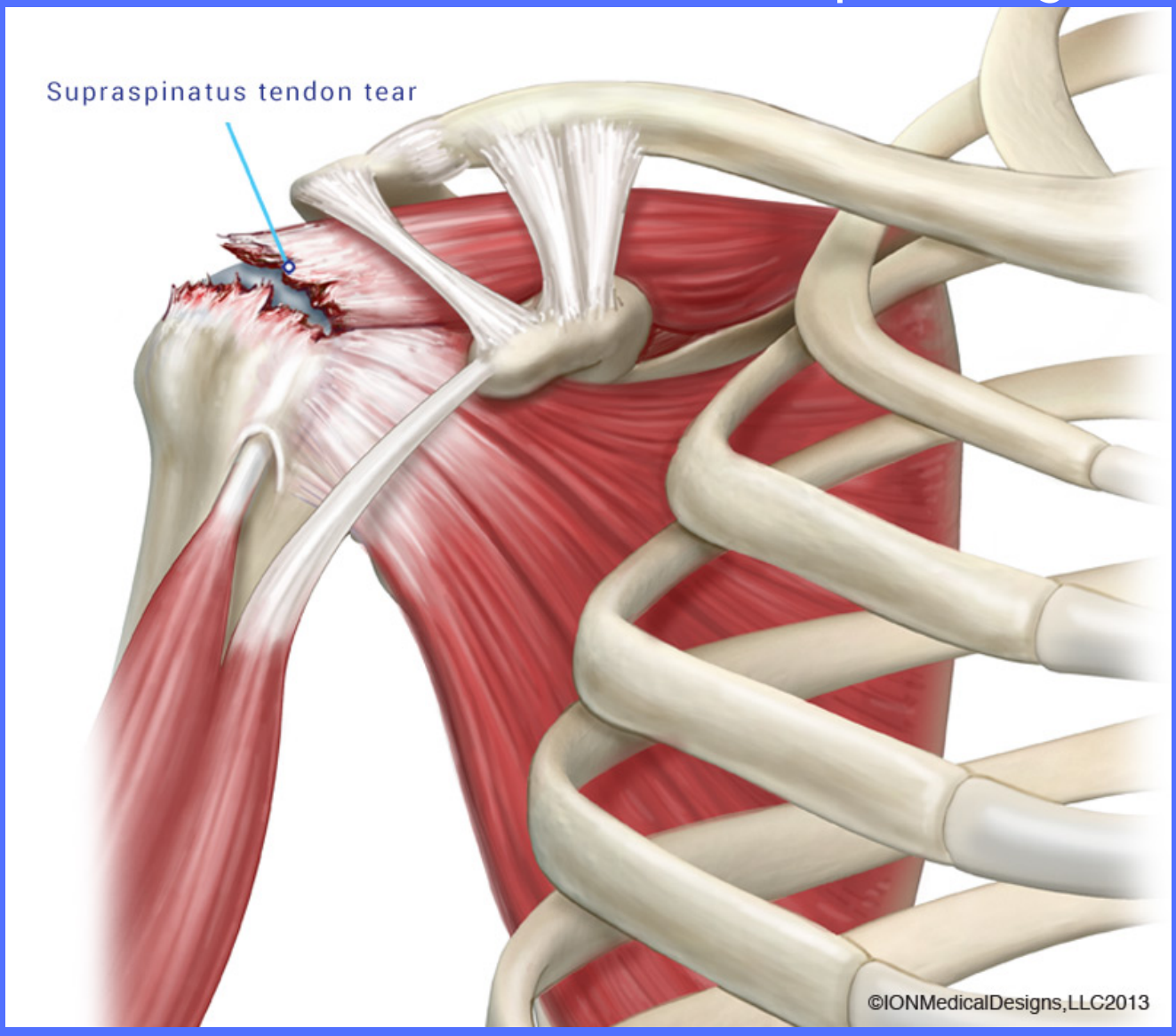
MRI ACCURACY TO DIAGNOSE ROTATOR CUFF PARTIAL TEARS

Full Text

Yazigi et al. 2019

(Click to Open)

This study determined intra- and interobserver agreement in diagnosing supraspinatus partial-thickness tears and associated pathologies.



KEY FINDINGS

Intraobserver agreement for supraspinatus tears was:
Moderate for:
MSK radiologists
Orthopedic shoulder surgeons
Fair among:
Fellowship-trained shoulder surgeons and orthopedic surgeons.

The overall intraobserver agreement was good.

Intraobserver agreement was moderate for:
Biceps tendonosis.
Acromial morphology.
Acromioclavicular joint arthrosis.
Muscle fatty infiltration.

Interobserver agreement results were fair to poor.

MAIN TAKEAWAYS

There was an overall good intra-observer agreement for supraspinatus partial tears via MRI.

However, there were also poor and fair inter-observer agreement results.

The evaluators with higher levels of experience demonstrated better intra and inter-observer agreement results than the evaluators with lower levels of experience

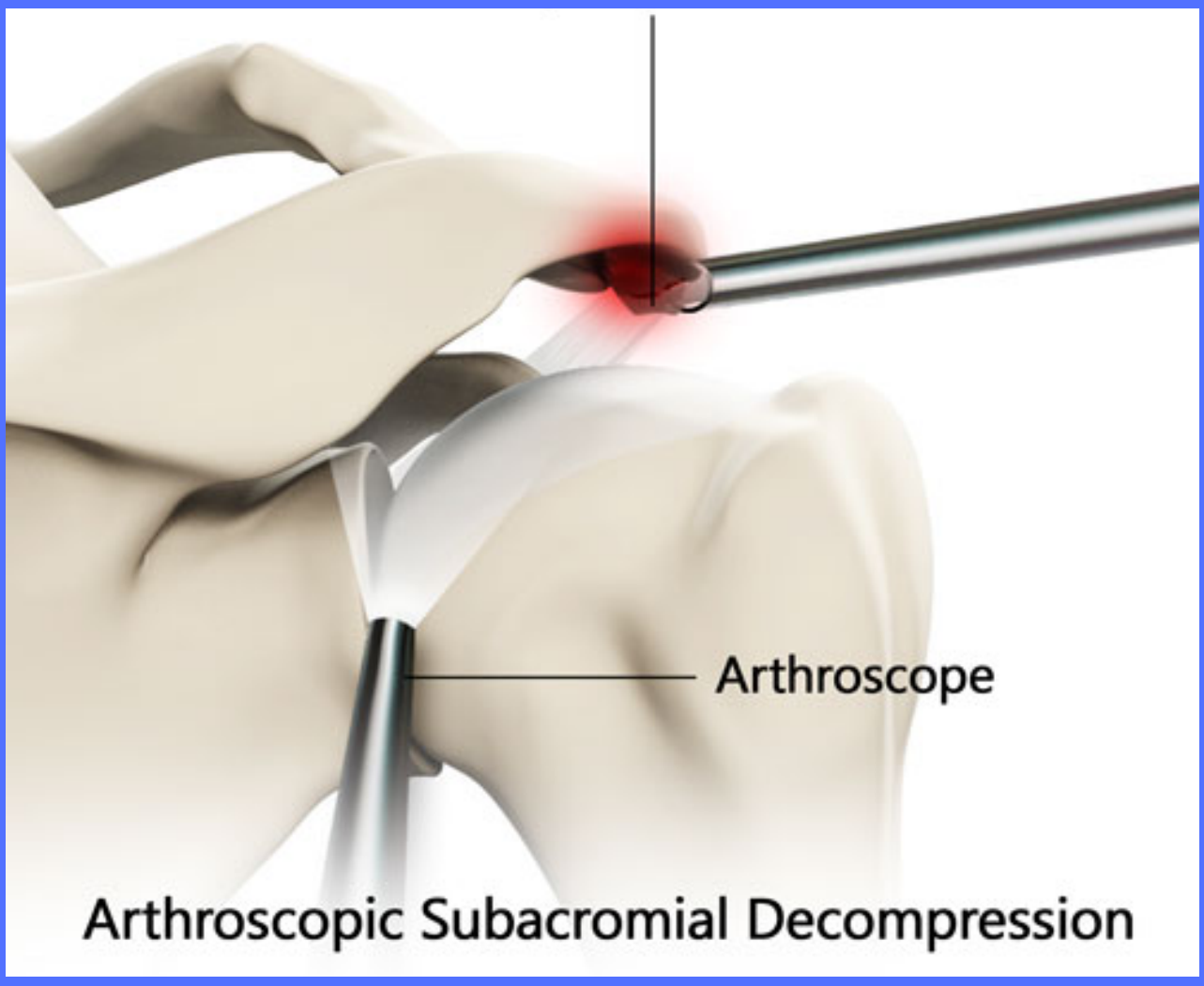
ARTHROSCOPIC SUBACROMIAL DECOMPRESSION (ASD) VS. PLACEBO VS. EXERCISE

Full Text

Paavola et al. 2021

(Click to Open)

This , double blind, placebo surgery controlled trial, assessed the long-term (5 years) efficacy of ASD for impingement syndrome vs. a placebo surgical intervention, and with exercise therapy.



KEY FINDINGS

175 participants (83%) completed the 5 years follow-up

ASD vs Placebo
No significant between group differences at 5 years for primary or secondary outcomes.

ASD vs exercise therapy:
Marked improvement from baseline to 5 years for both primary outcomes in the ASD and exercise therapy groups.

Slight difference in average pain (1/10) at rest and with activity.
No significant between-group differences for the secondary outcomes or adverse events.

MAIN TAKEAWAYS

ASD, placebo surgery, & exercise therapy resulted in **significant improvements in pain and functional outcomes.**

ASD had no superior improvements over placebo or exercise therapy at the 5 years follow-up.

Subacromial decompression surgery in patients with shoulder impingement is not recommended for subacromial pain.

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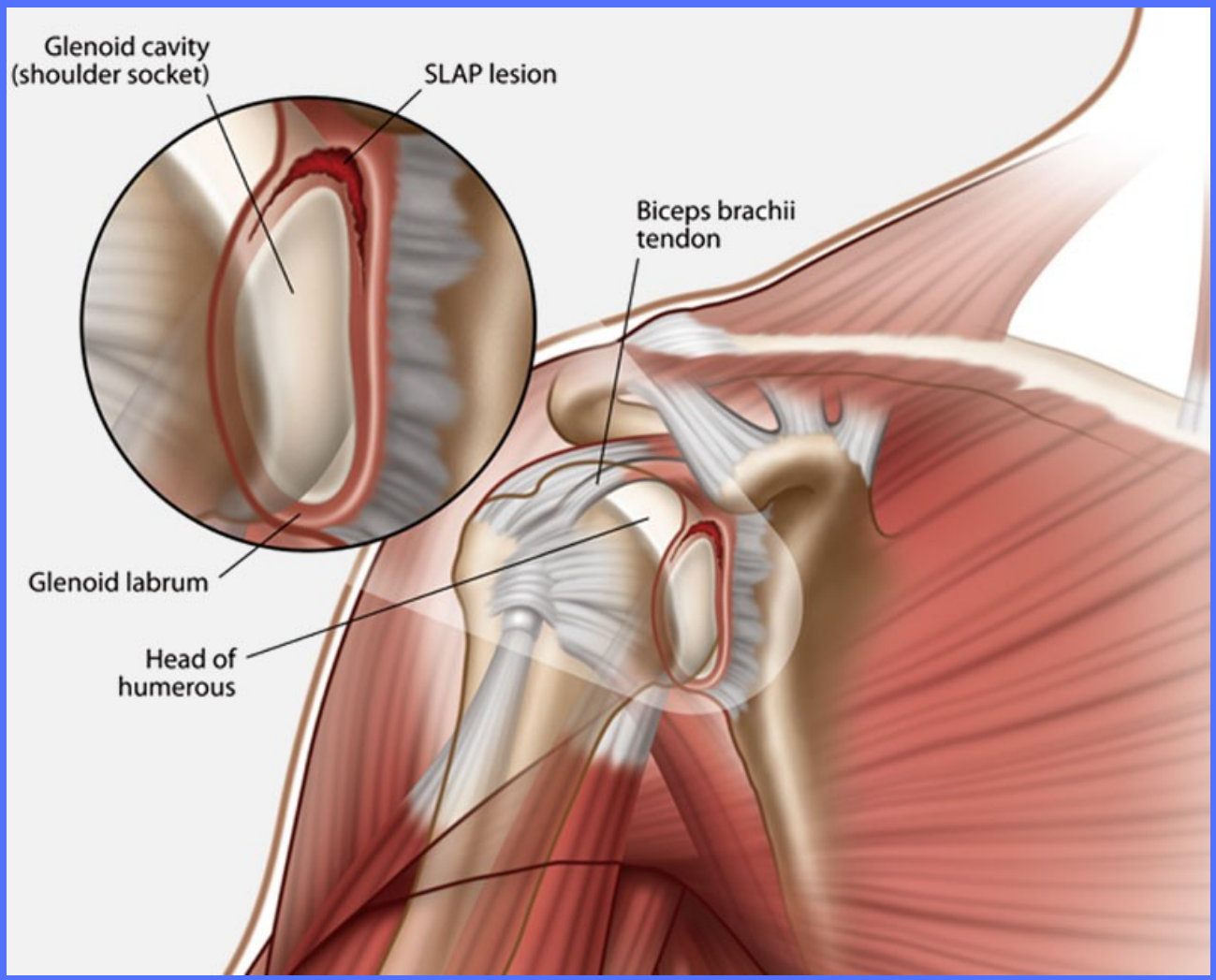
DIAGNOSING SLAP TEARS: MRA VS SPECIAL TESTS

Full Text

Clark et al. 2019 (Click to Open)

This study examined specific combinations of SLAP lesion special tests in an effort to identify which clusters of tests have the highest combined sensitivity and specificity.



KEY FINDINGS

MRA sensitivity is reported at 65-98% and has a specificity between 80-100%.

Best Single Test:
The Biceps Load Sensitivity of 90% and a specificity 96%.

Best 2-Test:
Bicep Load I and Bicep Load II; Sensitivity of 99% and a Specificity of 100%

Best 3-Test:
Biceps I, Biceps II and O'Brien's test; Sensitivity of 99.9%

Best 4-Test:
Biceps Load I, Biceps Load II, Passive Compression and O'Brien's test; Sensitivity of 99.9% and a Specificity of 99.9%

Best 5-Test:
All 5 tests (Biceps Load I, Biceps Load II, Passive Compression, Speed's and O'Brien's); Sensitivity & Specificity were 99.99%

MAIN TAKEAWAYS

A combination of **3 or more positive clinical tests for a shoulder labral tear** may be used to confidently diagnose (or rule out) a shoulder SLAP lesion.

This study may **allow clinicians to better identify** when and MRI/MRA or specialist referral is needed.

Patients with **less than 3 positive clinical tests are less likely to have a SLAP lesion**, and therefore may be considered appropriate to be managed conservatively.

GIVE US YOUR FEEDBACK!

MEMBERS

We are on a mission to make research more accessible, easier to interpret, and quicker to implement.

Help us by giving 1 minute of your time to leave feedback for us.

We would greatly appreciate any feedback you have, as it helps us continually improve!

Leave Review