Canadian Shoulder Research Group

OFF THE CUFF

The Official Publication of the CSRG

Volume 1, Issue 1

May, 2002

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ABOUT THE GROUP...

The Canadian Shoulder Research Group is an organization of Canadian Orthopaedic Surgeons who specialize in shoulder surgery and who are dedicated to efficient medical progress through high quality collaborative research to improve the care of patients with diseases and conditions of the shoulder.

Off the Cuff—Inaugural Edition!

Welcome to the inaugral edition of "Off the Cuff", which we would like to propose as the official publication of the Canadian Shoulder Research Group (CSRG). Since our group includes so many centres and individuals, it was thought that a newsletter would be a great way to stay in contact and keep everyone updated on the comings and goings of the group. So here we are!

This publication will be dedicated to the business of the CSG as well as the clinical trials it undertakes. There will also be space for anyone within the group who is interested in "advertising" or informing the rest of the group about other ongoings such as other trials,

COA 2002, Victoria

Canadian Shoulder Research Group Meeting at COA

As most of you have already heard, a meeting of the Canadian Shoulder Research Group has been organized during the 2002 Canadian Orthopaedic Association Annual Meeting in beautiful Victoria, B.C.! So yes you will have to tear yourself away from whale watching for just a few hours!

The meeting is scheduled for **Sunday June 3, 2002 from 11am—2 pm.** It will be held at the **Chateau Victoria, Room 610.** The purpose of this meeting is to discuss the trials which the CSRG is currently involved in (ORATEC, Cement Study, Bursectomy study, Mini vs. Open Rotator Cuff Study) as well as any new business that needs to be brought to the group. The research assistants involved with the above named studies will also be meeting at the COA prior to the CSRG meeting in order to iron out any administrative details ahead of time.

Please forward any items you would like added to the agenda to Katie Dainty at kdainty@uwo.ca as soon as possible. A final agenda will be sent out prior to the meeting.

Cement Study Welcomes New Coordinator!

As of December 2001, you probably have been getting numerous emails from a new member of our group. Katie Dainty has taken over as the study coordinator for the Cemented vs Uncemented TSA study! Katie replaces Sharon Griffin who we would like to thank for the tremendous amount of work she did in getting this study off the ground!

Katie originally hails from the raging metropolis of Petawawa, Ontario but now calls London, ON home. She has worked full-time in Research at the Fowler Kennedy Sport Medicine Clinic since finishing her M.Sc. in Kinesiology at Western. She has a special interest in shoulder research and is excited to become part of this trial. Welcome Katie!

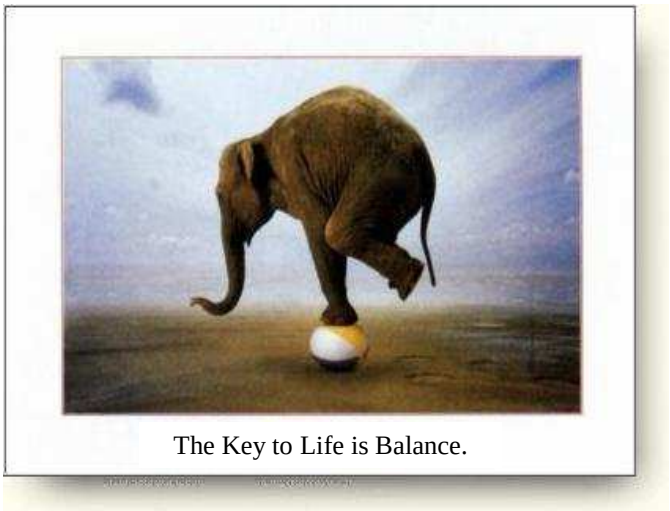
Photo Gallery

CANADIAN SHOULDER RESEARCH GROUP

John Antoniou– Montreal, QC
Robert Balyk– Edmonton, AB
Erin Boynton– Toronto, ON
Geoffry Dervin– Ottawa, ON
Darren Drosdewech– London, ON
Ken Faber– London, ON
Laurie Hiemstra– Calgary, AB
Bob Hollinshead– Calgary, AB
Richard Holtby– Toronto, ON
Sandy Kirkley– London, ON
Jordan Leith– Vancouver, BC
Bob Litchfield– London, ON
Peter MacDonald– Winnipeg, MN
Scott Mandel– Hamilton, ON
Bob McCormack– New Westminster, BC
Mike McKee– Toronto, ON
Jaydeep Moro– Hamilton, ON
Nick Mohtadi– Calgary, AB
Bill Reagan– Vancouver, BC
Eric Renaud– Montreal, QC

Nick's Olympic Experience!

Congratulations to Sandy Kirkley who was awarded the AOSSM/ESSKA European Fellowship. She was away from April 9th through May 6th and had an unforgettable time. She visited Oslo, Homburg,, Feldkirch, Gargonza, Roma, Geneva and Lyon. Hopefully we can look forward to the details on this fantastic trip from Sandy in the next issue of Off the Cuff!



The Key to Life is Balance.

We would like to use this page of the newsletter for cartoons, quotes and pictures of members of the group! Please send Katie whatever you can!

ORATEC STUDY

by: Treny Sasyniuk

The Multicentre Heat Probe study is finally progressing. As of March 31st, 2002, we have 29 patients entered in the study. The total sample size required is 108 patients… we are over a quarter of the way there!

Congratulations to Vancouver collaborators Dr. Bob McCormack and Ms. Mauri Zomar. They are the first site to have a patient complete the 2 year follow-up (final data collection). Well done! We welcome all of the new collaborators who joined the research team in the past year: Dr. Antoniou – Montreal; Dr. Hiemstra – Calgary; Dr. Holtby – Toronto; Dr. Jordan Leith – Vancouver; Dr. Mandel – Hamilton; and Dr. Moro – Hamilton. Thanks to the Arthritis Society and Oratec Interventions Inc. for funding this research and our annual meeting.

CEMENT vs NO CEMENT TSA STUDY

by: Katie Dainty

The Cement Study is just well on its way now! The protocol manual has been sent out to all the participating sites and the patient record forms are being printed at this very moment. There are 14 participating centres and the study has been fortunate enough to be funded through a CIHR/UI Research Grant! Our Industry partners are Zimmer Canada and we will be using their Bigliani-Flatow prosthesis. The Research Assistants at all the centres have been fantastic, considering all the ups and downs but we are all very anxious to get the study up and running so keep up the great work everybody!!!

A quick reminder to get those ethics submissions in ASAP and then fax a copy of your local ethics approval to Katie, if you haven't already done so!

Watch for the
STUDY PRIZE
★PATROL★
coming soon…

Don't Forget the Cement study is on the Web!!!

www.zimmercanada.com

BURSECTOMY vs. DECOMPRESSION STUDY

By: Elizabeth Wambolt

We are finally on the move with this study! A hard copy of the finalized protocol for was couriered out April 11, 2002 to all centres. Please let me know if you did not receive a copy. It is dated February 28, 2002 so please discard all other versions in your possession to avoid confusion.

Feel free to contact me if you require assistance with your ethics or grant submissions. We are very excited to get this study underway so get those submissions in asap! A quick reminder to get those ethics submissions in ASAP and then fax a copy of your local ethics approval to Beth, if you haven't already done so!

Canadian Shoulder Research Group

Questions, comments, compliments and correspondence regarding this publication should be addressed to:

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Literature

Radiographic Assessment of Ingrowth Total Shoulder Arthroplasty

Sperling JW, Cofield RH, O'Driscoll SW, Torchia ME, Rowland CM.
J Shoulder Elbow Surg. 2000 Nov-Dec;9(6):507-13

Sixty-two primary ingrowth total shoulder arthroplasties, performed between 1989 and 1992 and with a minimum radiographic and clinical follow-up of 2 years or until the time of revision surgery (mean, 4.6 years), were reviewed. To combine data on both the distribution and the thickness of periprosthetic lucency and change in component position, criteria were used to determine whether a component was radiographically "at risk" for clinical component loosening. A glenoid component was "at risk" when a complete lucent line was present, some part of it being 1.5 mm or greater in width, or when 2 of 3 or 3 of 3 independent observers identified migration or tilt of the component. A humeral component was "at risk" when a lucent line 2 mm or greater in width was present in 3 or more of 8 zones or when at least 2 of 3 independent observers identified tilt or subsidence of the component. Four (6.5%) of the 62 glenoid components and 6 (9.7%) of the 62 humeral components were judged to be "at risk." There were no identifiable patient, disease, or surgical characteristics associated with the development of an "at risk" glenoid or humeral component. Currently, despite this very favorable radiographic assessment, we reserve the use of a tissue ingrowth glenoid component for those patients with bone loss precluding bone cement fixation with a keel type of implant. Because advantages exist for use of a tissue ingrowth humeral component, a press-fitted component with ingrowth surfaces is currently used unless bone deficiencies prevent secure fixation without cement.

Recent Shoulder Publications By Members of The Group

Lo IK, Griffin S, Kirkley A. The development of a disease-specific quality of life measurement tool for osteoarthritis of the shoulder: The Western Ontario Osteoarthritis of the Shoulder (WOOS) index. Osteoarthritis Cartilage. 2001 Nov;9(8):771-8.

Kirkley A, Litchfield RB, Jackowski DM, Lo IK. The use of the impingement test as a predictor of outcome following subacromial decompression for rotator cuff tendinosis. Arthroscopy. 2002 Jan;18(1):8-15.

Antoniou J, Harryman D T 2nd. Posterior instability. Orthop Clin North Am. 2001 Jul;32(3):463-73, ix. Review

Wallace AL, Hollinshead RM, Frank CB. Creep behavior of a rabbit model of ligament laxity after electrothermal shrinkage in vivo. Am J Sports Med. 2002 Jan-Feb;30(1):98-102

Yoldas EA, Faber KJ, Hawkins RJ. Translation of the glenohumeral joint in patients with multidirectional and posterior instability: awake examination versus examination under anesthesia. J Shoulder Elbow Surg. 2001 Sep-Oct;10(5):416-20

Renaud P, Wahab H, Bontoux L, Dauty M, Richard I, Bregeon C. Total inverted shoulder prosthesis and rotator cuff insufficiency: evaluation and determination of anatomical parameters predictive of good functional outcome in 21 shoulders Ann Readapt Med Phys. 2001;44(5):273-80. **French**

Macdonald D, Fornasier V, Holtby R. Benign Fibrohistiocytoma (Xanthomatous Variant) of the Acromion. Arch Pathol Lab Med. 2002 May;126(5):599-601

MacDonald, P.B., Clark, P., Sutherland, K. An Analysis of the Diagnostic Accuracy of the Hawkins and Neer Subacromial Impingement Signs. Journal of Shoulder and Elbow Surgery Vol. 9 No. 4 July/August 2000 9:299-301