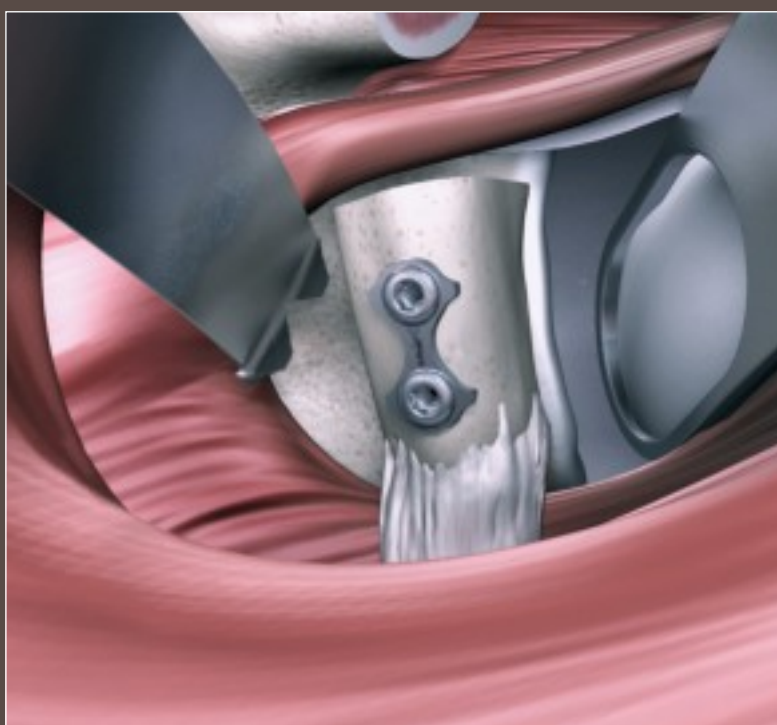




Mini Open Latarjet Technique

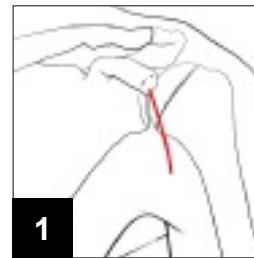
Surgical Technique



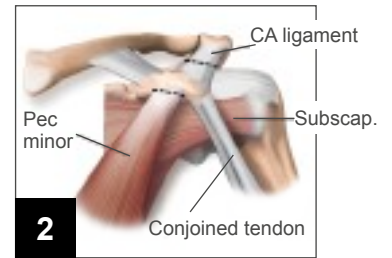
Mini Open Latarjet Technique

A 5 cm skin incision is made starting at the tip of the coracoid process and extending inferiorly, through the deltopectoral approach. Mayo scissors are used to clear the superior aspect of the coracoid process and a Hohmann retractor is placed over the top of the coracoid process.

- Incise clavicopectoral fascia
- Dissect CA ligament
- Release the Pectoralis minor from the Coracoid

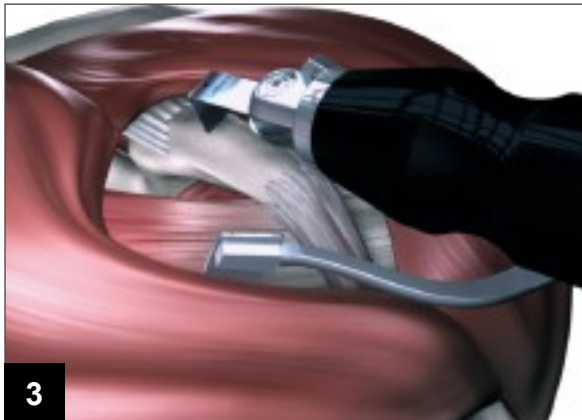


1



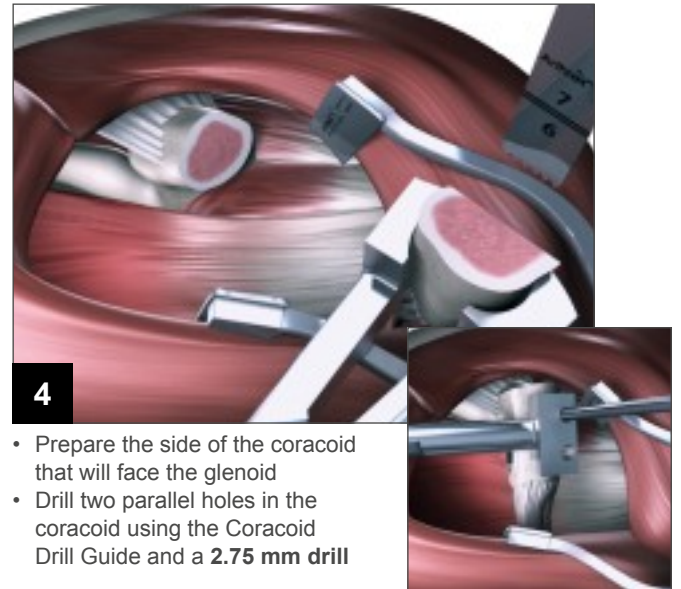
2

4-5 cm skin incision
deltopectoral approach



3

- Dissect fibrofatty tissue from inferior coracoid to its base
- Dissect up to CC ligaments
- Use 90° angled saw blade or osteotome to resect the coracoid



4

- Prepare the side of the coracoid that will face the glenoid
- Drill two parallel holes in the coracoid using the Coracoid Drill Guide and a 2.75 mm drill

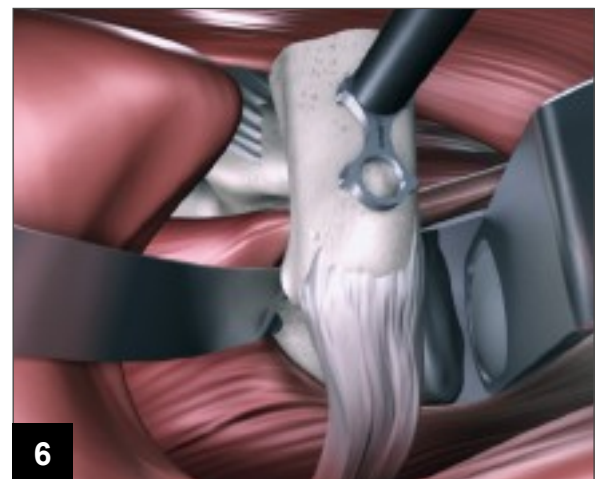


5

Wedged Profile Plate

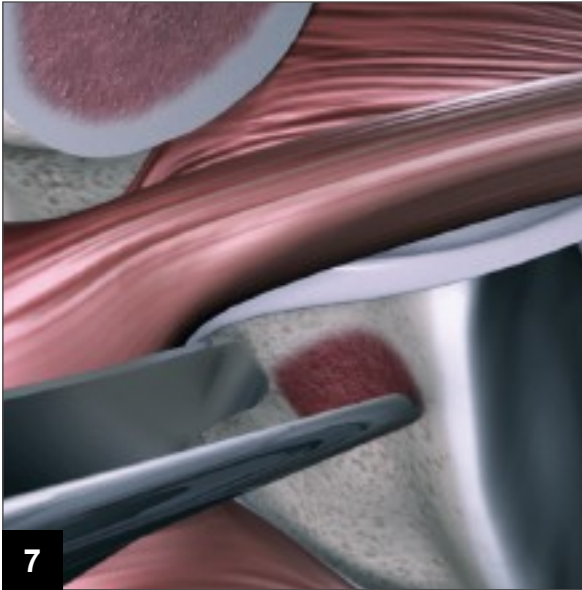
- The wedge profile is improving the match between coracoid bone block and glenoid
- Four spikes for more stability
- Two screw holes distribute the load evenly and avoid fracture of the bone block

CAVE: The thicker part of the plate has to be positioned medial to the glenoid neck.



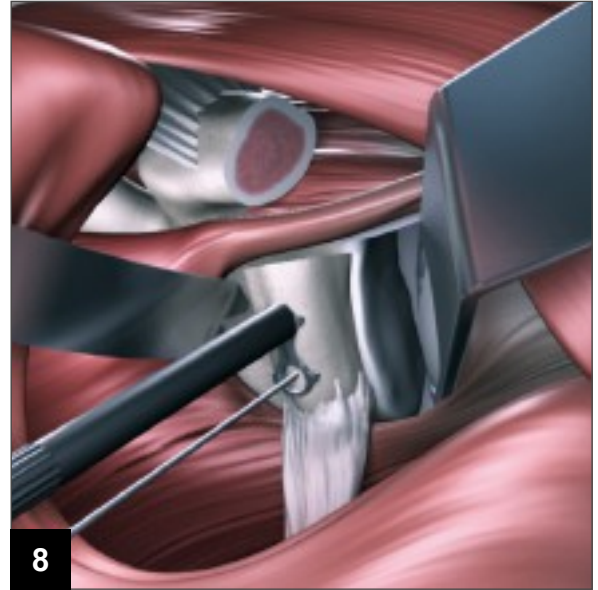
6

- Choose the Cannulated Temporary Compression Device (TCDC) and fix one side of the plate to the coracoid
- Define the superior border of the Subscapularis
- Split the Subscapularis and open the capsule to expose the anterior glenoid
- Use the Gelpi Retractor to keep the joint open
- Use the Fukuda, Swan and Blade Retractors to ensure the access to the anteroinferior part of the glenoid



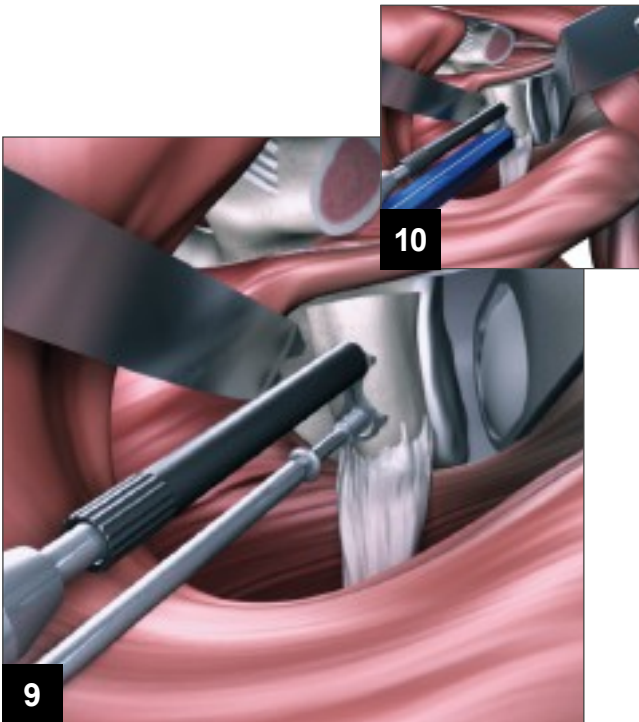
7

- Prepare the Glenoid neck with a burr



8

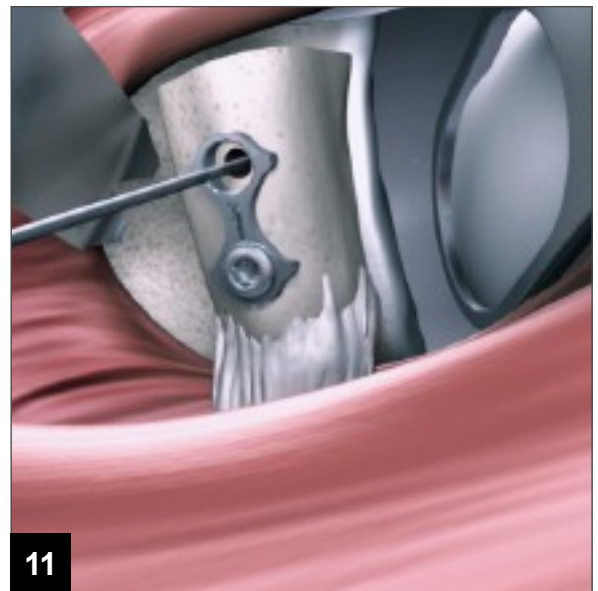
- Position the coracoid on the prepared Glenoid with the TCDC and drill one guide wire through the free hole of the plate into the Glenoid
- Drill a second guide wire through the cannulation of the TCDC



9

- Measure the appropriate length of the screw needed
- Leave the TCDC in position
- Insert the first screw over the guide wire into the plate/bone construct

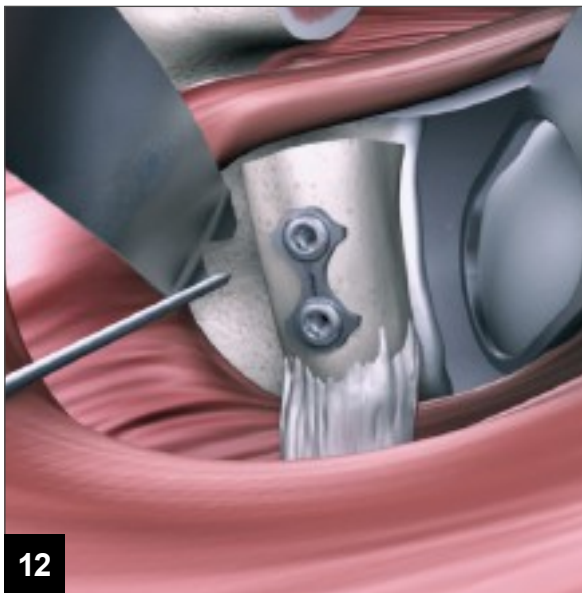
10



11

- Make sure, the bone graft is positioned properly on the Glenoid rim
- Remove the TCDC and apply the second screw over the guide wire
- The plate ensures a proper contact area between coracoid and glenoid

Mini Open Latarjet Technique

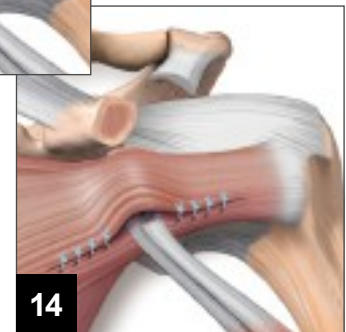


12

- The Conjoined tendon sling gives extra stability to the joint. Additional refixation of the labrum can be performed by using suture anchors. These should be placed into the Glenoid bone beside the graft.



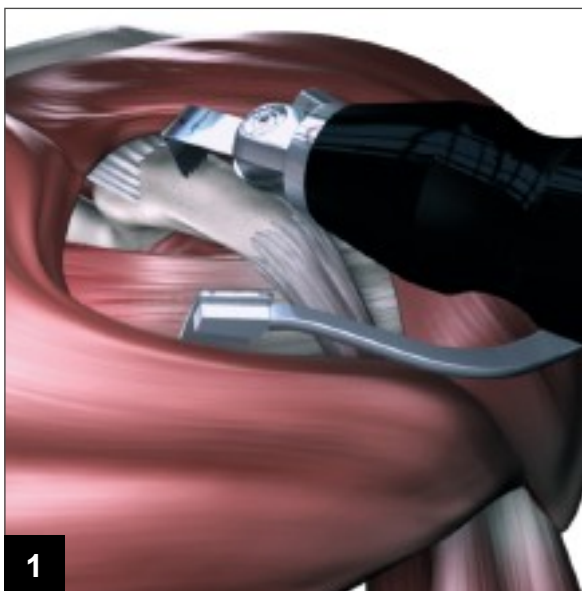
13



14

- The CA ligament stump is sutured to the capsule
- Layer by layer closure of the wound

Alternative Technique



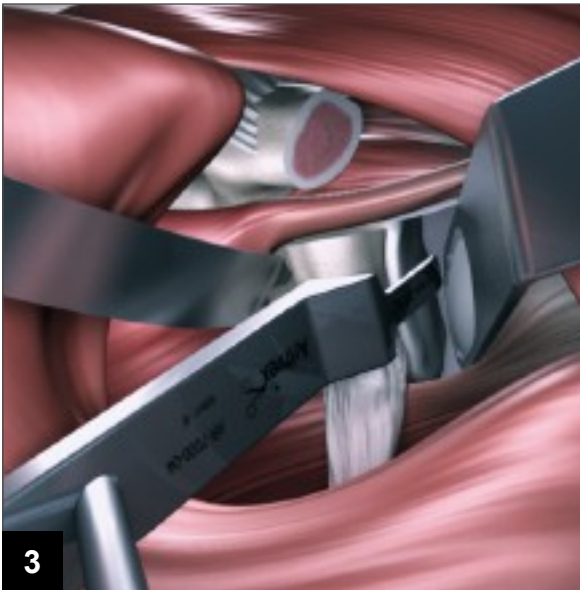
1

- Dissect fibrofatty tissue from inferior coracoid to its base
- Dissect up to CC ligaments
- Use osteotome or 90° angled saw blade to resect the Coracoid



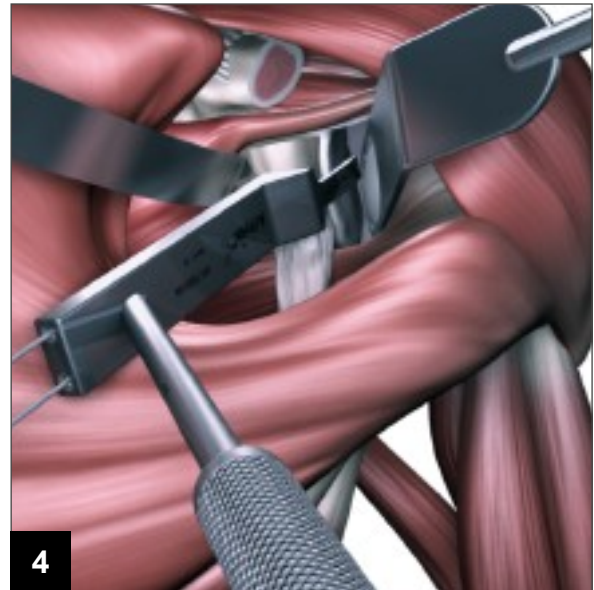
2

- Prepare the side of the coracoid that will face the glenoid
- Drill two parallel holes in the coracoid using the Coracoid Drill Guide and a 4 mm drill

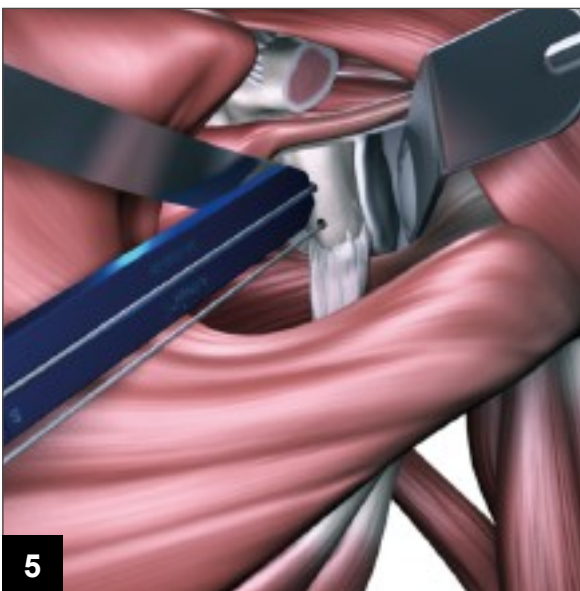


- Select appropriate Glenoid Drill Guide (6 or 8 mm offset) and fix the coracoid block on the Drill Guide.

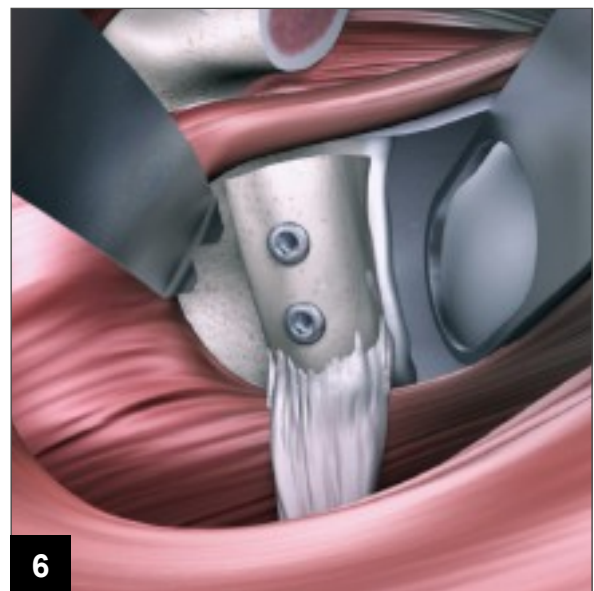
As an option the Wedged Profile Plate can be placed between bone and guides.



- Position the Glenoid Drill Guide with the coracoid block on the Glenoid rim and drill two guide wires through the guide into the glenoid



- Remove the Drill Guide and shape the graft with a Rongeur, if necessary
- Measure the required screw length using the measuring device
- Use a 2.75 mm drill over the guide wire to predrill the Glenoid



- The final fixation is achieved by two cannulated 4.5 mm screws

Ordering Information

Implants/Disposables

Wedge Profile Plate



AR-8111

Low Profile Screw™, Ti, 4.5 mm x 30 mm,
Cannulated, Partially Threaded

AR-8945-30PT

Low Profile Screw™, Ti, 4.5 mm x 32 mm,
Cannulated, Partially Threaded

AR-8945-32PT

Low Profile Screw™, Ti, 4.5 mm x 34 mm,
Cannulated, Partially Threaded

AR-8945-34PT

Low Profile Screw™, Ti, 4.5 mm x 36 mm,
Cannulated, Partially Threaded

AR-8945-36PT

Low Profile Screw™, Ti, 4.5 mm x 38 mm,
Cannulated, Partially Threaded

AR-8945-38PT

Low Profile Screw™, Ti, 4.5 mm x 40 mm,
Cannulated, Partially Threaded

AR-8945-40PT

Low Profile Screw™, Ti, 4.0 x 30 mm, Cannulated, Long Thread, Cancellous



AR-8740-30PTL

Low Profile Screw™, Ti, 4.0 x 32 mm, Cannulated, Long Thread, Cancellous

AR-8740-32PTL

Low Profile Screw™, Ti, 4.0 x 34 mm, Cannulated, Long Thread, Cancellous

AR-8740-34PTL

Low Profile Screw™, Ti, 4.0 x 36 mm, Cannulated, Long Thread, Cancellous

AR-8740-36PTL

Low Profile Screw™, Ti, 4.0 x 38 mm, Cannulated, Long Thread, Cancellous

AR-8740-38PTL

Accessory Instruments

Glenoid Bone Augmentation Case

AR-8100C

Screw Caddy for Mini Open Shoulder -

AR-8100C-SC

Glenoid Bone Augmentation Screw Caddy

Swan Retractor, right

AR-8102R

Swan Retractor, left

AR-8102L

Gelpi Retractor

AR-8104



Nerve & Fascia retractor

AR-8101

Bended Blade Retractor, 18 mm



AR-8100-18

Bended Blade Retractor, 26 mm

AR-8100-26

Parallel Drill Guide, 6 mm Offset



AR-7000-04

Parallel Drill Guide, 8 mm Offset

AR-7000-05

Handle, Drill Guide, 6.50" (16.5 cm) long



AR-9215-1-01

Screw Length Gage, Glenoid Bone Loss



AR-7000-06

Coracoid Drill Guide



AR-7000-07

Fukuda Style Retractor



AR-7000-08

Screw Driver, T15 Hexalobe, cannulated
Drill, 2.75 mm, 0.066" (1.67 mm) Cannulation
0.062" (1.57 mm) guide Wire, 7" (177.8 mm), long
0.062" (1.57 mm) Guide wire, 12" (304.8 mm), long
Bio-Tenodesis™ Screw Drill, 4.0 mm
Screw Driver Shaft cannulated, 3.5 mm Hex



AR-8943-09
AR-7000-14
AR-8941-7
AR-8941-12
AR-1204D
AR-8100D

Driver Handle with AO Connection, medium

AR-13421AO

Chondro Osteotome (100 mm)
Gelpi Retractor for Arthroscopic Use



AR-1767
AR-8104A

300 Saggittal Saw Blade, Angled, 19 x 10 x 0.6 mm

AR-300-450S

Temporary Compression Device, cannulated



AR-14023TCDC

Optional

Mini Open Shoulder Retractor, 21 mm
Modular Soft Tissue Retractor Atraumatic Replacement Paddle,
50 mm, right
Modular Soft Tissue Retractor Atraumatic Replacement Paddle,
50 mm, left

AR-8100-21

AR-8170-50DR

AR-8170-50DL

Osteotome Blade, Glenoid bone Loss



AR-7000-01

Osteotome Blade Shield



AR-7000-02

Doretail Meniscal Allograft Osteotome Handle



AR-2961

*Developed in Conjunction with Dr. G. Di Giacomo, Dr. A. Costantini, Dr. A. DeVita,
Prof. Ph. Hardy, Dr. N. Graveleau, Dr. J. Barth, Dr. S. Lichtenberg.*



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This description of technique is provided as an educational tool and clinical aid to assist properly licensed medical professionals in the usage of specific Arthrex products. As part of this professional usage, the medical professional must use their professional judgment in making any final determinations in product usage and technique. In doing so, the medical professional should rely on their own training and experience and should conduct a thorough review of pertinent medical literature and the product's Directions For Use.

**U.S. PATENT Nos. 5,964,783; 6,652,563; 6,716,234; 7,029,490 and PATENT PENDING
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