

Operative Technique of Glenoid Anteversion Osteotomy and Soft Tissue Rebalancing for Brachial Plexus Birth Palsy

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Abstract : The most of brachial birth palsies are transient. Children with incomplete recovery almost always develop an internal rotation and adduction contracture. The muscle imbalance around the shoulder results in glenohumeral joint deformity and functional limitations. Natural history of glenohumeral deformity is it's progression with worsening of function. Anteversion glenoid osteotomy with latissimus dorsi and teres major tendon transfers could be an alternative procedure of proximal humeral external rotation osteotomy for patients with severe glenohumeral dysplasia secondary to brachial plexus birth palsy. We will discuss pre-operative planning and stepped operative technique of the procedure on clinical example.

Keywords : obstetric brachial plexus palsy, glenoid anteversion osteotomy, tendon transfer, operative technique

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