

2019 NEHS Annual Meeting Abstract Submission

ABSTRACT TITLE *	Patient Reported Outcomes After Late Long Head Biceps Tenodesis after Spontaneous Rupture
Contact Person Name *	Sina Monfared
Contact Person Email *	
Contact Person Phone Number *	
Name of who will present abstract at NEHS meeting on December 6, 2019 Please note that the same person cannot present more than one abstract at the meeting. *	Sina Monfared
Please indicate if the presenter is: *	<ul style="list-style-type: none">Not currently a resident or fellow
List full names of abstract authors *	Sina Monfared, BA Jonathan Lans, MD, PhD Neal C. Chen, MD

ABSTRACT – should include background information and a description of methods, programs, or practices. *

Background: The aim of this study was to evaluate the factors influencing patient reported outcome measures (PROM) of late biceps tenodesis after proximal long head of the biceps tendon rupture.

Methods: Retrospective chart review was conducted to identify patients with a complete proximal rupture of the long head of the biceps that underwent biceps tenodesis between 2002–2017. This yielded 42 patients, of which 23 (55%) completed the PROMIS Pain Interference, PROMIS Upper Extremity, Quick DASH, and a custom biceps tear questionnaire, at a median of 8.5 years (IQR:5.2–12) post-operatively. The median age of the respondents was 57 years (IQR:43–61). The majority of patients (n=12, 52%) underwent tenodesis using suture anchor fixation, while the remaining underwent tenodesis with interference screw technique (n=6, 26%), key hole technique (n=1, 4.3%) or tunnel technique (n=1, 4.3%). A bivariate analysis was performed to evaluate factors influencing the PROMs.

Results: Six patients (27%) reported persistent biceps cramping at a median of 8.2 years post-operatively, negatively impacting PROMs, and this was associated with older age. Six patients (27%) had post-operative complications, including infection, pain, stiffness, and re-rupture, of which four patients (17%), underwent reoperation. Patients with activity/sports-induced injury or those that underwent tenodesis using a suture anchor technique demonstrated better PROMs.

Conclusions: Post-operative biceps cramping persists in almost one-third of patients and significantly impacts PROMs. Patient activity level and the use of suture anchor technique for tenodesis were independent predictors of improved biceps tenodesis outcome scores.

*
