Clinical Summary

Arthroscopic Rotator Cuff Repair Technique Using a Bio-Composite Scaffold for Tissue Augmentation

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Aim:

To introduce an arthroscopic rotator cuff repair technique using the BioBrace® scaffold, which provides both biologic and mechanical support for challenging cases like revisions and large tears.

Indications & Patient Selection

- Indications:
 - » Revision full-thickness rotator cuff repair.
 - » Large (>3 cm) or massive (>5 cm) rotator cuff tears.
 - » Chronic tears with Goutallier grade 3 or 4 fatty infiltration.
 - » Patients with comorbidities (e.g., smoking, diabetes).

Surgical Technique Overview

- Implant: BioBrace® (23x30mm)
- Preparation:
 - » BioBrace® can be trimmed and hydrated with autologous blood, PRP, BMAC on the back table
- Repair
 - » Double-row repair suture bridge repair using double loaded medial row anchors. 1 set of suture is crisscrossed and bridged to lateral row
 - » BioBrace® is shuttled arthroscopically and secured to second set of medial row sutures
 - » BioBrace® is secured laterally to a third row using 2.9-mm knotless anchors for fixation

Key Takeaways

- BioBrace® offers a fully resorbable scaffold that supports both early mechanical stability and long-term biologic healing.
- Augmentation is particularly suited for revision cases and large/massive tears with poor tissue quality.

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