TABLE E-1 Patient Profiles

							from initial		
							dislocation		
		Age	Age at initial	Mechanism of	Cause of initial	Initial	to op.	Total no. of	Sports
Case	Sex	at op.	dislocation	initial dislocation	dislocation	fixation	(month)	dislocations	Activity
1	M	16	16	forced elevation	throwing motion	none	3	2	kendo
2	M	30	17	forced hyperabd.	fall (sports)	none	156	10	baseball
3	F	18	17	forced elevation	fall (sports)	sling 6 w	12	7	basketball
4	M	18	15	forced hyperabd.	fall (sports)	sling 4 w	36	5	baseball
5	M	26	23	forced abd. and	fall (sports)	none	41	7	surfing
				ext. rotat.					
6	M	37	36	forced elevation	fall (sports)	none	7	2	boxing
7	M	43	42	direct blow	fall (accident)	brace 2 w	27	6	badminton
8	F	35	32	forced hyperabd.	fall (sports)	none	24	3	skiing
9	M	26	25	forced hyperabd.	fall (accident)	sling 1 w	9	3	_
10	M	15	15	direct blow	fall (accident)	brace 8 w	10	3	
11	F	16	14	forced abd. and	throwing motion	none	15	2	basketball
				ext. rotat.					
12	M	13	11	forced abd. and	throwing motion	sling 3 w	24	3	basketball
				ext. rotat.					

Duration

TABLE E-2 Clinical and Operative Findings

Case	General	Sulcus	Crank	CT	Arthroscopic fi	Surgical	
	joint	sign*	test	arthrography	Tear site	Hill-Sachs	procedure
	laxity					lesion†	
1	1/5	土	+	no Bankart	glenoid-side	none	arthroscopic
2	0/5	_	+	no Bankart	glenoid-side	grade I	arthroscopic
3	0/5	土	+	no Bankart	glenoid-side	grade I	arthroscopic
4	0/5	_	+	no Bankart	glenoid-side	grade I	arthroscopic
5	0/5	_	+	no Bankart	glenoid-side	none	arthroscopic
6	0/5	_	+	no Bankart	glenoid-side	none	arthroscopic
7	0/5	_	+	no Bankart	glenoid-side	grade I	arthroscopic
8	0/5	_	_	no Bankart	mid-portion	grade I	arthroscopic
9	0/5	±	+	no Bankart	mid-portion	grade I	arthroscopic
10	2/5	_	+	no Bankart	mid-portion	grade I	arthroscopic
11	0/5	_	+	no Bankart	humeral-side	grade I	open
12	0/5	_	+	no Bankart	humeral-side	none	arthroscopic
*The o	ulone cion m	oc gradad	() to () according to the	shift of the hum	aral hand. No	shift of the

*The sulcus sign was graded (–) to (++) according to the shift of the humeral head. No shift of the humeral head was (–), a shift of less than half of the humeral head diameter was (±), a shift of half of the humeral head diameter was (+), and a shift of more than half of the humeral head diameter was (++). †The Hill-Sachs lesion was classified as no Hill-Sachs lesion, a chondral indentation (grade I), a subchondral defect (grade II), or severe osteochondral impaction (grade III) in accordance with the classification system of Calandra et al.⁴.

TABLE E-3 Clinical Results at Time of Follow-up

		Instability (awake)*			Range of motion†				Rowe score	
	Crank	30°	90°			ER		Return to		
Case	test	abduction	abduction	ABIS	Elevation	add.	ER abd.	sports	Preop.	Postop.
1	_	±	+	±	180/180	80/80	110/110	complete	55	100
2	_	_	±	_	175/180	40/50	90/100	complete	35	95
3	_	_	_	_	180/180	80/80	90/90	complete	30	100
4	_	_	_	_	180/180	65/65	90/90	complete	30	100
5	_	_	_	_	180/180	75/75	95/95	complete	30	100
6	_	_	_	_	170/180	45/60	85/90	complete	20	90
7	_	_	±	_	180/180	55/65	85/100	impossible	30	35
8	_	_	_	±	180/180	60/80	95/100	complete	25	95
9	_	_	_	_	180/180	60/60	90/90		25	95
10	_	_	±	±	180/180	80/90	100/110		40	90
11	_	_	_	_	180/180	50/60	80/90	complete	30	85
12	_	_	<u>±</u>	_	180/180	80/80	100/100	complete	15	100

*Postoperative instability was assessed with the load-and-shift test, while the patient was awake, with translation in an anterior direction with the shoulder in 30° of abduction and in 90° of abduction, and with translation in an inferior direction with the shoulder in 90° of abduction (ABIS). Instability was graded according to the shift of the humeral head: no shift of the humeral head was (–), a shift of less than half of the humeral head diameter was (\pm), a shift of half of the humeral head diameter was (+), and a shift of more than half of the humeral head diameter was (++). †The first number shows the range on the operatively treated side, and the second shows the range on the contralateral side. ER add. = external rotation in adduction and ER abd = external rotation in 90° of abduction.