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PRIMARY ARTHROSCOPIC STABILIZATION FOR A FIRST-TIME ANTERIOR DISLOCATION OF THE SHOULDER. LONG-TERM FOLLOW-UP OF A RANDOMIZED, DOUBLE-BLINDED TRIAL

http://dx.doi.org/10.2106/JBJS.19.00858

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APPENDIX – Original Trial Selection Criteria

Inclusion Criteria¹⁴:

- (1) Radiographic confirmation of a first-time anterior glenohumeral dislocation caused by a substantial external force applied to the shoulder either in a collision, fall, or other forceful injury;
- (2) No associated fracture visible on conventional radiographs at the time of presentation;
- (3) No other axial or appendicular musculoskeletal injury;
- (4) An age between fifteen and thirty-five years inclusive at the time of the primary dislocation;
- (5) Presentation to our shoulder clinic within two weeks of the primary dislocation;
- (6) No medical contraindications to general anesthesia or evidence of cognitive impairment;
- (7) Informed consent obtained from the patient or his or her guardian (if the patient was less than sixteen years old);
- (8) A local residence and the ability to attend follow-up evaluations during the two years after the primary dislocation; and
- (9) Detection of an anteroinferior capsulolabral detachment (a Bankart lesion) on the arthroscopic examination of the shoulder. If no Bankart lesion was detected on the initial examination, our protocol stipulated that an arthroscopic lavage alone should be performed, irrespective of the patient's group randomization. However, the patient would continue with trial follow-up and would be analyzed as part of the group to which he or she was initially randomized (according to standard intention-to-treat methodology).

Exclusions¹⁴:

- (1) Non-traumatic shoulder dislocation;
- (2) Presence of an additional fracture visible on conventional radiography.
- (3) Presence of another axial or appendicular musculoskeletal injury.
- (4) Delayed presentation at the shoulder clinic of more than two weeks after the primary dislocation.
- (5) Patient refusing to participate in trial randomisation.
- (6) Any history of recurrent shoulder instability.