

Arthroscopic Treatment of Osteochondritis Dissecans (OCD) in the Shoulder

Indications

Osteochondritis dissecans (OCD) is a localized injury or condition affecting the bone just below the cartilage surface of a joint. OCD is often associated with repetitive trauma and sports. In OCD, the involved bone just below the joint surface fails and fractures from repetitive stress or from interruption of its local blood supply. Eventually, the overlying cartilage, not properly supported by the affected bone, can separate and an OCD fragment of bone and cartilage can break loose. If the OCD is stable (not loose) and the patient is still growing, conservative treatment of rest sometimes can allow it to heal. However, when the OCD lesion is more mature and has separated from the rest of the bone with the overlying cartilage either intact, partially separated or completely separated (loose body), surgery is often needed to stimulate, graft, stabilize, or remove the OCD fragment. If neglected, the OCD may come loose, catch in the joint, (causing pain, locking, clicking, etc.) and leave a hole in the joint surface that will accelerate the wear and tear and development of arthritis of the shoulder joint. Arthroscopic surgery is indicated to evaluate and remove or repair these OCD fragments when they fail conservative treatment or are separating and unable to heal. It is unknown exactly what causes OCD but many theories exist including; traumatic injury (direct injury to the joint), repetitive stress (overuse), loss of blood supply to the bone, and abnormal bone formation.



MRI of an OCD lesion of the humeral head indicated by the arrow. This flattened (worn) area of humeral head should be more round in shape.

Contraindications to Surgery

- Infection in the shoulder
- Inability or unwillingness to complete the postoperative program of limiting activity after surgery and to complete the necessary rehabilitation



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Surgical Risks and Complications

- Wound infection
- Bleeding or injury to blood vessels
- Injury to nerves (numbness, weakness, etc.)
- Non-union (non-healing) of the OCD fragment (in repair situations)
- Shoulder stiffness
- Arthritis

Hospitalization and Anesthesia

- Outpatient surgery (you go home the same day)
- General anesthesia with interscalen block (numbing medicine injected around the nerves to the arm)

General Surgical Technique

Some OCDs can be repaired while others cannot, depending on the size, location, age, etc. of the lesion. In either situation, Dr. Chudik evaluates and treats OCDs through small limited incisions and specialized instruments of his own design with the use of an arthroscope (small camera). Lesions that cannot be repaired can be removed with special instruments and the hole left in the bone and cartilage can be smoothed of any rough edges or unstable flaps and stimulated to fill in with reparative tissue. Other OCD lesions can be repaired in a variety of ways depending on the location and size of the OCD lesion. Dr. Chudik will discuss various options with you and help determine the best treatment for you.

Preoperative Instructions

- Discontinue birth control pills
- Stop blood thinners such as aspirin, Coumadin[®], Lovenox[®], Xarelto[®] according to the prescribing doctor's directions
- Stop anti-inflammatory medicines such as ibuprofen, Advil[®], Motrin[®], Naprosyn[®], Alleve[®], etc.)
- Stop nutritional supplements and drinks like Vitamin C, ginseng, ginkgo biloba, etc.
- Stop smoking for surgery and during the first six weeks postoperatively to allow proper tissue healing

Do not eat or drink anything from midnight, the evening before surgery



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Postoperative Course

- Sling for up to six weeks
- Return to school/sedentary work in less than one week
- Physical therapy to restore motion and strength for up to four to six months.
- After the shoulder is fully rehabilitated, **Dr. Chudik's Shoulder Functional Capacity Evaluation** is performed to determine if the shoulder is fully rehabilitated and whether the patient can return safely to activities.

Return to Activity

- Return to gentle, daily activities about six to eight weeks after surgery
- Return to sports at the four to six months after surgery depending on sport and position

Scheduling Surgery

Contact Dr. Chudik's surgery scheduler at 630-324-0402 or contactus@chudikmd.com to:

- Schedule the date and location of surgery (the hospital will call the day before with the confirmed arrival time)
- Schedule a pre-operative appointment
- Schedule a post-operative appointment for ten to 14 days after surgery to remove sutures and review post-operative instructions

Notify My Office if Symptoms Worsen

