**Latarjet procedure and Bone block transfer stabilisation**

*Patient and therapist information sheet*

**Procedure details:** The latarjet procedure involves transferring the coracoid bone, part of the scapula with some of the muscles that attach to it, and fixing the bone/muscles/ligament to the anterior glenoid. This helps prevent dislocation. A similar result can be achieved with transferring an Allograft (donated bone from deceased individual) to the region of glenoid.

**Goals of treatment:** To allow the stabilising structures to heal in the desired location to improve the shoulder stability, prevent further dislocations. The rehabilitation phases allow initial pain to settle and structures transferred to heal in the desired location.

The subsequent phases aim to increase range of motion and gain function of the shoulder without loading the healing structures. The final stages of rehabilitation involve muscle tone and strengthening to improve shoulder biomechanics. These exercises are to benefit both shoulders and can be done for some time after healed and returned to your desired activities to ensure good shoulder balance.

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| Phase | Time (weeks) | Restrictions | Exercises |
| 1 | 0-2 | Wear a sling | Pendulums  Active hand, wrist and elbow range of motion  ER to neutral in Adduction  Can perform static muscle activation. |
| 2 | 2-6 | Sling for sleeping, and out of the house.  OK to remove when sitting at home or exercises | Passive and active assisted ROM  Flex 120, Abd 90, IR full, ER aim for full ADER |
| 3 | 6-12 | No Sling. No contact sports  Cycling, running, gentle swimming allowed from 8-10/52 after RV. | Aim for full AROM.  Passive stretches can be employed at 10 weeks if not full ROM. |
| 4 | 12-20 | No contact sports | If competitive athlete, Following CT scan can return to sport specific training. Aim for Game ready by 5 months.  Sport specific training  Strengthening and periscapular strengthening  Gym work |