CLINICAL OUTCOME DATA FOLLOWING ROTATOR CUFF REPAIR USING SINEFIX™

A RETROSPECTIVE ANALYSIS OF FUNCTIONAL AND PAIN-RELATED PARAMETERS

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EXECUTIVE SUMMARY

This paper summarizes retrospective clinical outcome data from patients undergoing rotator cuff repair using SINEFIX, with a focus on postoperative pain development during early follow-up.

METHODS

A retrospective review was conducted in 20 consecutive patients who underwent rotator cuff repair using SINEFIX. Pain intensity was assessed using a visual analogue scale (VAS) preoperatively and during routine postoperative follow-up visits up to approximately 90 days. n = 19 patients had complete pre- and postoperative VAS data available for analysis.

RESULTS

In the analyzed cohort (n = 19), mean VAS pain scores decreased significantly from 5.89 (SD 2.49) preoperatively to 2.53 (SD 2.65) at the last postoperative follow-up (Wilcoxon signed-rank test, $p < 0.01$), indicating a clinically meaningful reduction in patient-reported pain during the early postoperative period.

No intraoperative complications were reported. Furthermore, no patient expressed dissatisfaction with their outcome during the available follow-up period. The operating surgeon also reported that the new technique was straightforward to perform and easy to integrate into the surgical workflow.

CONCLUSION

In this retrospective dataset, rotator cuff repair using SINEFIX was associated with reductions in pain within the studied patient cohort.

No intraoperative complications were observed, and patient satisfaction was consistently positive. Further prospective studies including functional and structural outcome measures are warranted to confirm these findings.

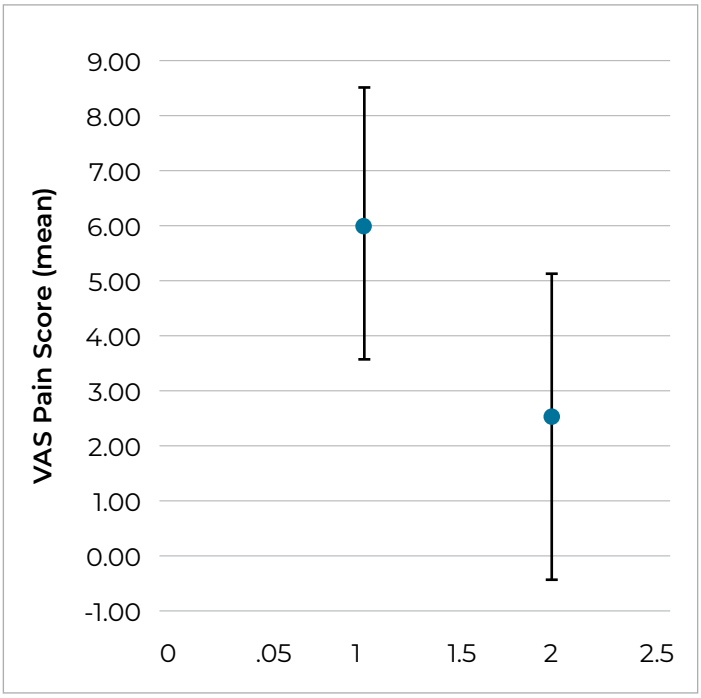

FIGURE 1
Mean preoperative versus last follow-up VAS pain scores following rotator cuff repair using SINEFIX. Retrospective analysis, n = 19.

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SINEFIX is FDA cleared and approved for use in the U.S.

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