Advances in Arthroscopic Surgery for Young ATHLETES

Youth sports today are intense. Athletes can often find their passion and drive cut short by an incapacitating injury. From the shoulder to the hip, the knee to the ankle, the damage sustained can end up requiring surgery.

“The current advances in arthroscopic surgery being offered at TOI include hip arthroscopy, all-arthroscopic rotator cuff repair, arthroscopic shoulder stabilization procedures and anatomic knee ligament reconstructions,” explains Dr. Jesse Wild, who specializes in adult and pediatric sports medicine. “Many of these techniques offer improved outcomes and quicker recovery.”

Two of his more recent cases highlight these successes:

At age 15, José Hernandez had dislocated his shoulder five times while playing football for Salpointe High School. After numerous painful trips to the emergency room to pop it back in place, he sought help from Dr. Wild. The hits Hernandez endured had caused a Bankart lesion to the shoulder joint called the labrum.

The soft tissue in his shoulder needed repair. So, instead of a large incision across the shoulder, Wild and his team were able to make a few small incisions to repair the damage. “He did really well and got all of his motion back and returned to play sports at Salpointe.”

Says Hernandez, “My parents sat me down and I agreed. We decided no more football. I play lacrosse now. It’s physical but not as physical as football.”

“I think arthroscopic shoulder repairs really have led to better and quicker recovery for most patients,” says Wild. “Being able to surgically opening the larger muscles over the shoulder and still accomplish a good repair seems to benefit athletes and non-athletes.”

A softball player for 14 years, Natasha Lewis started experiencing significant hip pain months after giving birth to her daughter last year. “It really started to bother me. I couldn’t wear high heels because it was too much stress on my leg. I couldn’t walk when I got out of bed in the morning.”

Wild managed the case first non-operatively and conservatively, giving her pain-relieving injections and briefing her on the risks of surgery. Yet, the pain progressed so much, Lewis elected to move forward. She also had suffered a labral tear affecting the soft tissue in the hip socket. Three tiny incisions enabled Wild and his team to repair the damage.

“I was soon out of bed and walking around,” recalls Lewis, who has since moved to Colorado. “I really can’t believe how much movement I have in my hip now.”

She is most thankful for Wild’s personal care, even after she moved away.

“He called me several times after my surgery to see how I was feeling,” she says. “As soon as I found out where I was moving, he found me another doctor up here just in case I needed someone.”

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