

Category	Category 3: Compensation, Disability Management and Return to work
Year Funded:	2011
Budget:	\$7520
Investigators:	Ian Lo, University of Calgary (aanelson@ucalgary.ca)
Funding Agency:	Workers' Compensation Board of Alberta (WCB)
Title:	Evaluation of MRI Assessment of SLAP Lesions
Issue/Rationale:	<p>Labral tears of the shoulder cause significant pain and dysfunction. These tears are often repaired arthroscopically if non-operative treatment has failed. We know that most patients experience decreased pain and improved function following surgery, however we don't really know if the labrum actually heals back down to the bone after surgery.</p> <p>The goal of this study is to examine images of the shoulder post-operatively, and see if the radiologists who read them are relatively consistent in describing if they have healed or not.</p>
Objectives:	-To determine the inter- and intra-rater reliability of evaluation of post-operative magnetic resonance arthrograms in patients who have previously undergone arthroscopic repair of a Type II SLAP lesion
Anticipated Results/Impact:	<p>Many workers require time off work while they attempt to rest their shoulder, decrease their symptoms, and potentially "heal" their torn labrum. However, many will not achieve a pain-free shoulder with non-operative treatment, and will eventually seek surgical repair, resulting in even more time off work.</p> <p>Post-operatively, a worker must be evaluated for their ability to return to work. Understanding the anatomic outcomes post-operatively, including the reliability of radiologists reading the images, forms a crucial part of the return to work process. Understanding whether healing has occurred or not could have significant impact on the WCB in terms of the course of a worker's compensation claim. Radiologists' ability to interpret imaging as intact or re-torn must be understood in order for the examiner to make an accurate assessment of the worker's status and to understand whether healing has occurred or not.</p>
Keywords:	SLAP lesions, MR-arthrograms, reliability, radiologists, return to work