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Zu Reverse-Hill-Sachs-Läsion bei dorsal verhakter Schulterluxation

Leserbrief zu

J. Theopold, P. Hepp (2018) Reverse-Hill-Sachs-Läsion bei dorsal verhakter Schulterluxation. *Arthroskopie* 1:9-20. <https://doi.org/10.1007/s00142-017-0170-x>

Literatur

1. Posterior dislocation of the glenohumeral joint in field practice. *Ortopedie* 2014: <http://medakta.cz/cislo.php?casopis=ortopedie&rocnik=2014&cislo=4#695>. Zugegriffen: 18. März 2018

Dear colleagues,

I read the article on “Reverse-Hill-Sachs lesion in dorsally locked shoulder dislocation” with interest.

As part of the “Tips and tricks” section, I recommend an easy manoeuvre for conservative reposition. The displaced arm is simply abducted, which unlocks the humeral head and leads to its reposition. The procedure does not need assistance and it is successful without anaesthesia in acute cases.

Our sample of 10 cases (including bilateral neglected displacement) was published in the Czech national non-indexed journal *Ortopedie* [1] (the next 3 cases have now been managed since that time).

With regards
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Interessenkonflikt. J. Lubojacký gibt an, dass kein Interessenkonflikt besteht.