

RADIOACTIVE SYNOVECTOMY of the SHOULDER JOINT in PATIENTS with HAEMOPHILIA

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OBJECTIVES

Shoulder joint is relatively infrequently affected in PwH. Relatively deeper positioning of this joint than some others such as knee, shoulder and ankle renders it technically more difficult for percutaneous interventions. In this study, our aim is to report our mid-term results of RAS of shoulder joint in PwH.

METHODS

During 10-year period experience with radioactive synovectomy (RAS) we performed 8 RAS of shoulder joint in 7 patients and they constituted 2.1% of our all RASes. All cases except one had Haemophilia A and three of whom had inhibitors. Average age of patients at the time of RAS was 19,3 (range 14 to 25). One patient had two RAS on the same shoulder joint with a-year-interval. We performed RAS on five right and three left shoulder joints. We used 2 mc Re-186 in 6 cases and Y-90 in two. All procedures were performed under topical anaesthesia and sedation using spinal*type longer needles. Intra-articular placement of the needle was confirmed by image intensifier. After the procedure patients' arms were placed in a sling for three days and then formal physiotherapy was begun. No specific problem was encountered in early or long run.

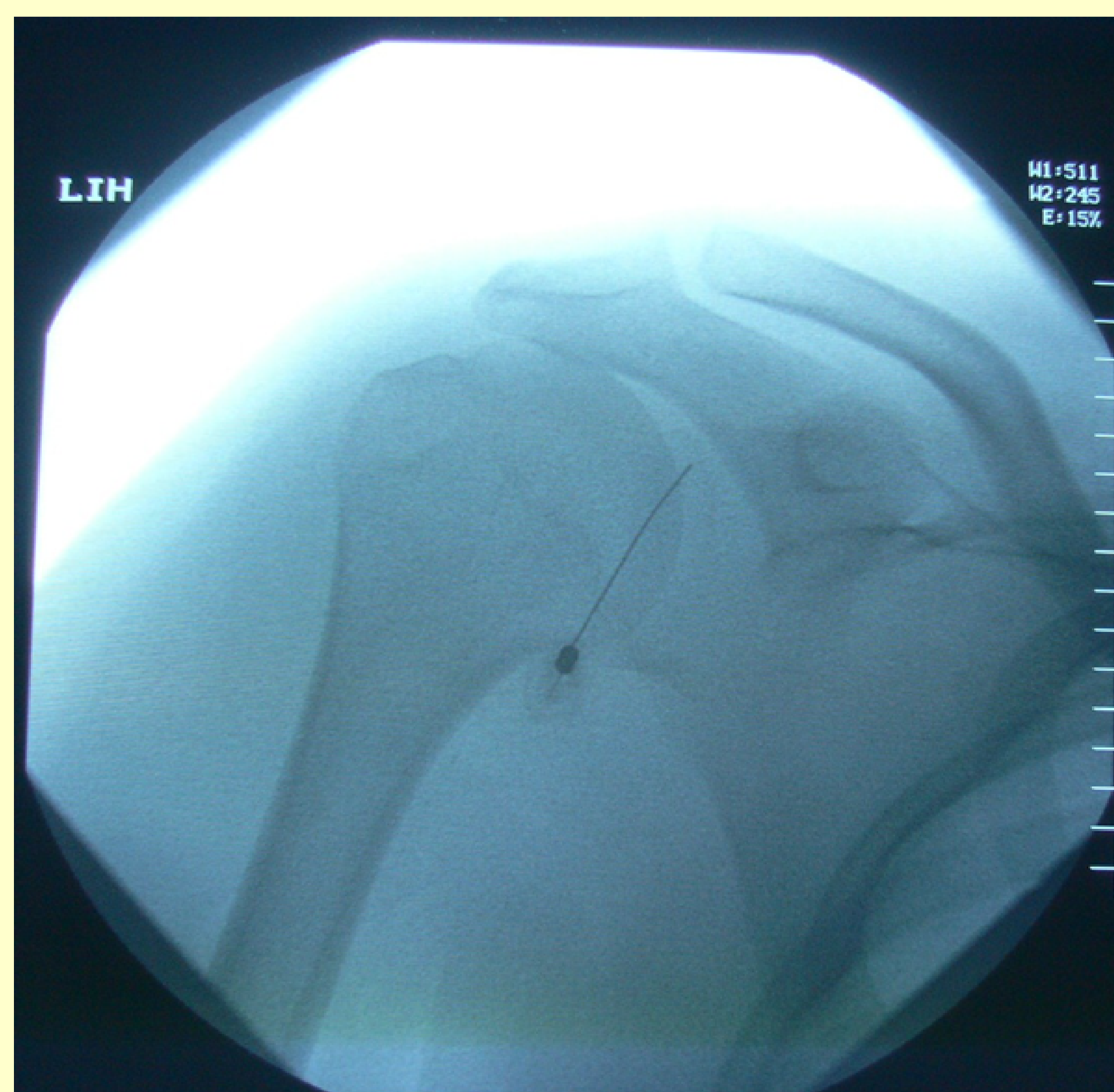
Pt No	Pt initials	Age	Type	Inhibitor	Date of RAS	Isotope	Bleeding episodes	Outcome
1	E K	23	HA	+	06-2003 06-2004	Y 90 Y 90	No after 2nd	Very good after 2nd
2	M T	21	HA	-	05-2005	Re 186	Diminished	Good
3	U K	14	HA	+	09-2005	Re 186	No	Very good
4	Ö Ö	17	HB	-	05-2006	Re 186	No	Very good
5	I K	14	HA	+	09-2009	Re 186	No	Very good
6	A	25	HA	-	11-2010	Re 186	No	Very good
7	M	21	HA	-	11-2010	Re 186	Diminished	Good

RESULTS

In only one case haemarthrosis attacks persisted after Y-90 RAS and we had to repeat the procedure one year later and with using again Y-90. This patient was the first case in this series. After second RAS, joint bleeding attacks discontinued. In all other cases (n=6), single use of Re-186 RAS was sufficient to stop (n=4) or significantly diminish (n=2) bleeding attacks. We have got a complete response in 57% and partial response in 43% with RAS on shoulder joints.

CONCLUSIONS

RAS of shoulder joints with Re-186 in PwH is an effective treatment modality and yields similar results with RAS procedures of more commonly performed joints.



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