Abstract SOF

The classification of acromioclavicular joint dislocations does not benefit from stress view radiographs

J Nordin, F Sondén, K Lunsjö VO Ortopedi, Helsingborgs lasarett

Introduction

Acromioclavicular joint dislocations are classified using clinical examination and radiographs. The Rockwood classification system is most commonly used and it has been suggested that stress radiographs are needed for accuracy. Since previous studies contradict each other we aim to evaluate the usefulness of stress- and internal rotation radiographs as compared to non stress views.

Patients and methods

138 patients with acromioclavicular joint dislocations were radiographed in stress views, non stress views and internal rotation views. All radiographs were classified by two experienced radiologists. Wilcoxon signed rank test was performed to analyse if there was any difference in classification between the radiographic projections. All cases that were up- or downgraded were individually analysed to find the reason for the change in classification.

Results

A total of 403 radiographs were evaluated. In 90% of the stress views and 82% of the internal rotation views classification remained the same as in the non stress views. No statistically significant difference between the radiographic methods could be found. Both upgrades and downgrades were seen in an almost haphazard fashion in the cases that did change grade.

Discussion

Stress view radiographs are painful for the patient and does not contribute to the classification of acromioclavicular joint dislocations.

Conclusion

Stress views and internal rotation views does not result in more accurate classification of acromioclavicular joint dislocations.