27 y/o male with shoulder pain

Edward Gillis, DO
Additional History

- Injured shoulder lifting weights
- Possible dislocation
Hill-Sachs lesion with bony Bankart fracture
Hill-Sachs lesion

Bony Bankart lesion
Hill-Sachs lesion
Normal Shoulder Anatomy

- Humeral head (black line)
- Greater tuberosity (white line)
- Lesser tuberosity (brown line)
- Surgical neck (brown shade)

Anteroposterior view

Normal Shoulder anatomy

- Joint capsule attaches at the anatomic neck of the humeral head (arrows)
- Glenoid process of the lateral scapula is formed by the glenoid fossa (yellow shadow) and glenoid neck (blue lines)
- Base of coracoid process (gold outline) demarcates the anatomic glenoid neck (black arrowheads)
- Surgical neck (brown shade)


Grashey View
Normal Shoulder Anatomy

- Humeral head (black line)
- Lesser tuberosity (brown line)
- Glenoid fossa (yellow shadowing)
- Glenoid neck (blue lines)
- Coracoid process (gold outline)

Axillary view

Hill-Sachs lesion

- Occurs during anterior glenohumeral dislocation.
- Strong muscle contraction and ligaments impact posterolateral humeral head against the anteroinferior glenoid.
- Wedge-shaped defect on the superior portion of the posterolateral humeral head.
  - Posterior and medial to the greater tuberosity.
  - Can be identified as a flattening or indentation of the humeral contour close to the contour of the greater tuberosity.
Bankart and Bony Bankart Lesion

- A Bankart lesion is detachment of the glenoid labrum and joint capsule from the anterior glenoid rim during anterior glenohumeral dislocation.
  - Bankart Lesion
- Occasionlly accompanied by an anterior glenoid fracture
  - Bony Bankart lesion
References