Dr. Louis McIntyre, MD Reveals Innovative New Way To Repair Rotator Cuff Problems

Dr. Louis McIntyre, a surgeon based in Westchester County, NY announced the results from a clinical study, unveiling a new technique for treating rotator cuff injuries.

This breakthrough procedure offers an alternative to the old fashioned knot-tying method, where surgeons would hand tie a knot to bind the tissue and ligaments to the bone during shoulder surgery. This new technique leverages technology called "UltrasonicSuture Welding" which greatly simplifies the closure of sutures during surgery, creating a more effective and durable repair. Dr. McIntyre is leading the way in this field and is the only surgeon in Westchester County performing arthroscopic rotator cuff repair using this new technique.

White Plains, NY (PRWEB) July 17, 2006 -- Dr. Louis McIntyre, today announced results from a study comparing the clinical efficacy of mini-open rotator cuff repair utilizing ultrasonic suture welding technology versus standard knot-tying techniques. This study was conducted on 50 consecutive patients who underwent rotator cuff repair between January 2001 and February 2002 and has met its primary objective, proving that surgeries performed with suture welding are as efficient and dependable as those that are done by standard knot-tying. Furthermore, this study demonstrates similar end results with no statistical difference in post operative scores between patients with suture welds and hand tied knots.

"The validation provided by the data from this trial is important as we continue to evaluate new techniques for treating shoulder injuries," said Dr. Louis McIntyre. "I strongly believe in utilizing new technology to enhance the surgical process. This study clearly demonstrates that ultrasonic suture welding technology is comparable to hand-tied knots which is the first step in being able to effectively use this technique arthroscopically."

With shoulder injuries on the rise due to people exercising more frequently and aging, new techniques are being developed to better treat these injuries. Dr. Louis McIntyre is leading the way in this field by using innovative new technologies such as ultrasonic suture welding, while eliminating the need for the more cumbersome knot-tying technique. This revolutionary technology uses energy in the form of vibration to weld sutures in a focused area.

By leveraging technological advances from companies like Axya Medical, Inc., a leading medical device company, Dr. McIntyre is able to offer these unique new treatments to patients for a more consistent and reliable repair on both tissue-to-tissue and tissue-to-bone surgeries. Additionally, by using Axya's pioneering "Knotless Fixation System," knot slippage is no longer a concern. This combination of technology and innovation makes torn rotator cuff, Bankart, SLAP and soft tissue repairs more efficient and stable.

Dr. McIntyre concludes, "Welded loops proved to be very consistent with small variations in ultimate load and in elongation. In contrast, the variability of failure mode and load-elongation parameters for knotted loops was much higher. These results suggest that welded loops may provide reliable and highly reproducible repairs compared to hand-tied knots where slippage may compromise the outcome."

Benefits of Ultrasonic Suture Welding:
· Stronger, more reliable stitches.

· Ideal for tissue-to-tissue and tissue-to-bone repair.

· Reduction in slippage that you get from hand tied knots.

· Hand tied knots tend to slip when subjected to the normal cyclical motions of the shoulder. (Most of the slippage occurs with the first few applications of stress to the suture loop, right after repair. Slippage of the knots may lead to gaps at the repair site that may impact negatively on healing.)

· More repeatable surgical process with more consistent results.

· Less time in surgery.

· Employs same techniques that surgeons already use and know.

· Torn rotator cuff and soft tissue repairs made with greater efficiency - Welds hold the tissues together more securely to facilitate repair and healing.

· Makes transition from mini-open to arthroscopic surgery easier than ever.

About Dr. Louis McIntyre, MD

Dr. McIntyre was born and raised in Westchester County and currently resides in White Plains with his wife, Lizzanne O'Toole and their four children.

He is a graduate of Pleasantville High School and the College of the Holy Cross in Worcester, MA. He received his medical degree at New York Medical College in Valhalla and completed his orthopaedic residency at the Long Island Jewish campus of the Albert Einstein Medical Center. He studied arthroscopy and sports medicine with Dr. Richard Caspari in Richmond, Virginia at Orthopaedic Research of Virginia. Dr. McIntyre has been in practice at Westchester Orthopaedic Associates since 1994 and specializes in the use of arthroscopy to treat shoulder, knee, elbow, wrist and ankle injuries.

He has lectured in the United States and abroad on the subject of shoulder arthroscopy and has published several articles in peer review journals. He has been a Master Instructor at the Orthopaedic Learning Center in Chicago, Illinois and is active in the Arthroscopy Association of North America.

Dr McIntyre is the Chief of Orthopedics and Medical Board member at the Westchester Ambulatory Surgery Center and is on staff at White Plains Hospital. Dr McIntyre is Director of The Shoulder Center at Westchester Orthopedic Associates. He is an advisor for shoulder arthroscopy to Axya Medical in Beverly, MA.

About the Study

Fifty consecutive patients treated by one surgeon with mini-open cuff repair and suture welding were retrospectively evaluated and compared with 55 consecutive patients treated with mini-open cuff repair and hand-tied knots. The groups were similar in age, sex, hand dominance and preoperative duration of symptoms.
All procedures were performed in a hospital outpatient surgery center in a lateral decubitus position under a general anesthetic. A glenohumeral arthroscopy and arthroscopic acromioplasty were performed in all cases. The rotator cuff tear was repaired through an enlargement of the lateral portal. All patients were evaluated prior to and after surgery with the UCLA shoulder scale.

Forty-seven of the fifty suture weld patients were available for evaluation with an average follow-up of 26 months. Pre-op UCLA scores averaged 12.5 and post-op 29.6. Forty of the fifty-five patients treated with hand-tied knots were available with an average follow-up of 28 months. Pre-op UCLA score averaged 13.2 and post-op 31.5.

This study represents the first report of the clinical results of tissue repair utilizing ultrasonic suture welding. The study group of consecutive patients treated by one surgeon demonstrates the applicability of the technology for rotator cuff repair. A mini-open technique was employed to facilitate comparison with a similar group of consecutive patients treated by the same surgeon prior to the adoption of the welding procedure. Future study will document the use of this technology in consecutive patients with an arthroscopic technique.

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