

### Looking Forward and Back: The Value of Arthroscopy, Shoulder Controversies, Hip Advancements, Cartilage Cutting Edge, and Arthroscopy Techniques

As the year 2013 winds to a close, we look forward, and we look back.

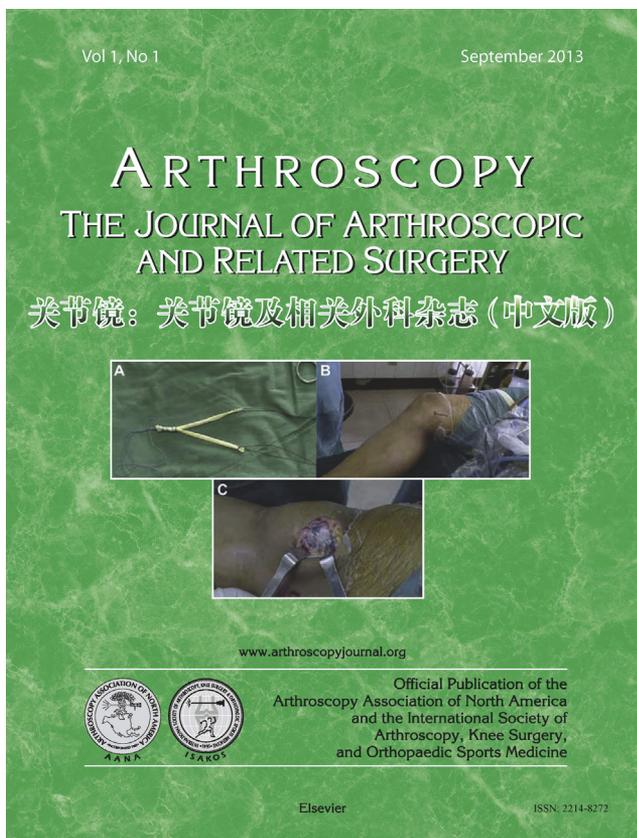
In an accompanying editorial in this issue,<sup>1</sup> Editor-in-Chief Poehling, his M.D., M.P.H. colleague Hamid, and his M.D., M.B.A. colleague Nwachukwu, look forward to our specialty, arthroscopy, becoming a “star” in the sky of value-based medicine, and they (and we), looking to the future, “actively solicit studies that link outcomes and cost in order to aggressively create a modern body of literature elucidating value in arthroscopy.” In addition, the editorial reflects Dr. Poehling’s long-standing passion on issues of the cost and value of arthroscopy in an era of economic challenge.<sup>2-4</sup> We remind readers that we have published Level I evidence showing that the most common orthopaedic procedures, knee arthroscopy and knee ACL, are “very cost-effective.”<sup>5</sup> Readers and researchers, inspired by this editorial, may wish particularly to review our past musings on “Lower price high volume better outcome maximum efficiency minimally invasive: a developing model for health care delivery”<sup>3</sup>; we feel that it is time to validate this model.

In the past, your editors have exhorted, “Controversy in Arthroscopy: Bring it on,”<sup>6</sup> and when it comes to arthroscopic rotator cuff repair, “the controversy continues.”<sup>7</sup> Related to this controversy, and also to issues of cost and value, is a ruminating Letter to the Editor from a surgeon with nearly 30 years of arthroscopic experience, Jose Miguel Palomo of Castelló, Spain.<sup>8</sup> The title of his letter is “The Rotator Cuff Repair Mess,” which entirely speaks for itself. We wonder if this letter was inspired, in part, by the September 2013 Level V evidence, expert opinion of Burkhart and Denard, “The Evolution of Suture Anchors in Arthroscopic Rotator Cuff Repair,”<sup>9</sup> a piece about which we, quite frankly, received significant feedback ranging from rapturous renderings of “genius” and “everything he said was 100% correct” to stirrings on the topic of “commercial conflicts of interest” (all well disclosed by the authors), which is also mentioned, albeit not specific to Burkhart and Denard, in Dr. Palomo’s letter. Looking back, readers interested in this issue of clear “complexity” may want to review our

editorial interview with Dr. Alan Barber, “Single- Versus Double-Row Arthroscopic Rotator Cuff Repair: The Complexity Grows.”<sup>10</sup> Dr. Barber takes a position substantially different from that of Burkhart and Denard, a position well supported by Dr. Barber’s extensive published research.<sup>11,12</sup> Looking ahead, with regard to the rotator cuff, as we’ve predicted, “Shoulder arthroscopy literature remains controversial,”<sup>13</sup> and we encourage continued submission of letters, expert opinions, and ultimately original scientific articles, which will all be required to resolve current questions.

As we continue to look back on the September issue in particular, we feel we would be absolutely remiss to end this year without a comment on the important, prospective comparative study, “Surgical Dislocation of the Hip Versus Arthroscopic Treatment of Femoroacetabular Impingement: A Prospective Matched-Pair Study With Average 2-Year Follow-up” by Domb, Stake, Botser, and Jackson.<sup>14</sup> These authors conclude that arthroscopic treatment of femoroacetabular impingement showed greater improvement in patient outcomes than open surgery. To modify popular urban slang, “That’s what we’re talking about!” If you missed Domb et al., it’s worth a look back. And, looking all the way back to 2006, we today feel justified in having identified hip arthroscopy as “an emerging gold standard.”<sup>15</sup> Looking forward, we acknowledge that a single study may in the future be refuted, so we await additional evidence clarifying the role of arthroscopy in the treatment of FAI. Also looking forward, we continue to await additional evidence clarifying the role of “hip arthroscopy in patients with early arthritis.”<sup>16</sup>

In this issue, we also note the special section on cartilage from The Asian Cartilage Repair Society. As the official journal of ISAKOS,<sup>17</sup> we are honored to publish authors from all over the world, and we commend all of the contributors to this special section. For an additional introduction, please read the editorial by Drs. Hui, Goyal, Nakamura, and Ochi, whom we especially thank.<sup>18</sup> Looking back, and while we respect a cautious emphasis on safety, we have twice this year lamented that the Food and Drug Administration in the United States has constrained us in the area of cartilage and stem cell clinical application,<sup>17,19</sup> and we look forward to continued innovation and advances from our international colleagues.



**Fig 1.** The first issue of the Chinese edition of *Arthroscopy*, September 2013.

We close the year with a final focus on our online journal, *Arthroscopy Techniques*. Looking back, we have much emphasized the role and importance of the “new” journal.<sup>20-22</sup> All things age, and in 2014, we will no longer call *Arthroscopy Techniques* new. As we noted this year, our primary goal, now achieved, was that, “*Arthroscopy Techniques* ([www.arthroscopytechniques.org](http://www.arthroscopytechniques.org)) is now indexed on PubMed Central as *Arthrosc Tech*. We are proud to share (yet again) that this significant editorial goal has been accomplished.”<sup>23</sup> A second significant goal for *Arthroscopy Techniques* has been to develop robust and substantial content. Our authors have met and exceeded the challenge—*Arthroscopy Techniques* has quickly expanded from 1 article with a video per week, to 2 a week, and now to 3 articles with video a week. Looking forward, it wouldn’t surprise us if 4 articles with video per week soon become the norm, as was once the case last month, as will be noted below...and so on...and so on. A third significant goal with regard to *Arthroscopy Techniques* is a much needed upgrade to our web platform as well as our journal app. This has been promised by Elsevier, our publisher, and while at the time of this writing we are still waiting, we are confident that if the upgrade has not occurred by the time you read this editorial, it will happen soon enough.

In *Arthroscopy Techniques*, we publish many advanced, state-of-the-art and cutting-edge techniques commensurate with the experience and ability of our core readers. In addition, we wish to call to readers’ attention two *Arthroscopy Techniques* publications in November 2013 that review basic and classic techniques, which could be of immense educational value for beginning knee arthroscopic surgeons and trainees. First, Ward and Lubowitz<sup>24-27</sup> review “Basic Knee Arthroscopy” in a 4-part series covering patient positioning; surface anatomy and portal placement; diagnostic arthroscopy; and chondroplasty, meniscectomy, and cruciate ligament evaluation. Second, Nelson and Bonner review “Inside-out Meniscus Repair,”<sup>28</sup> a classic technique essential for beginning knee arthroscopic surgeons and trainees, as well as a vital review for those of us trained in, or now enamored with, all-inside meniscus repair techniques. Your editors are grateful to Nelson and Bonner, and share their desire to prevent inside-out meniscus repair from becoming a lost art. We once again emphasize that all *Arthroscopy Techniques* articles include a video.

We respectfully request readers who participate in the training of, or otherwise interact with, beginning knee arthroscopists, to please direct them to the articles cited above. This may serve the dual purpose of providing education to a new generation of arthroscopic and related surgeons, and introducing this new generation to *Arthroscopy* and *Arthroscopy Techniques* journals, as well as our related organizations, AANA, ISAKOS, ISHA.

And, speaking of goals, vis-à-vis our related organizations, we look back on achieving a goal in 2013 of publication of our first Chinese language version of *Arthroscopy* (Fig 1). We’ve tweeted about it (follow us on Twitter @ArthroscopyJ)<sup>29</sup> and we here acknowledge our friend, colleague, and Chinese *Arthroscopy* Editor, Dr. Shiyi Chen of Shanghai.

In conclusion, as we look back on 2013, we wish to all of you a healthy holiday season. And, as we wish you all a happy new year, we look forward to seeing you in print and online in 2014.

James H. Lubowitz, M.D.

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