

with acellular dermal allograft for the treatment of massive irreparable rotator cuff tears: Short-term clinical outcomes and the radiographic parameter of superior capsular distance. *Arthroscopy* 2018;34:1764-1773.

2. Denard PJ, Brady PC, Adams CR, Tokish JM, Burkhart SS. Preliminary results of arthroscopic superior capsule reconstruction with dermal allograft. *Arthroscopy* 2018;34:93-99.

**Author Reply to
“Regarding ‘Arthroscopic
Superior Capsular
Reconstruction With
Acellular Dermal Allograft
for the Treatment of
Massive Irreparable
Rotator Cuff Tears’”**



I wish to thank Dr. Narvani for his insightful reading of our article. As stated in our outcome analysis,¹ we are in the process of obtaining magnetic resonance imaging follow-up on all of our patients who have undergone the superior capsular reconstruction procedure. He is correct in noting that this article discusses radiographic failure in only those patients who underwent imaging owing to an unacceptable outcome. Our radiographic failure rate of 4 in 88 only accounts for these unsatisfied patients and most likely does not reflect the true imaging failure rate. As Dr. Navani referenced, Denard et al.² noted radiographic a healing rate of 45% in a similar patient population. We do believe that the clinical satisfaction rates are the most notable and important factor, however, as general

healing (on magnetic resonance imaging) of large rotator cuff repairs without superior capsular reconstruction is known to be quite poor. On completion of imaging of shoulders included in our series, a clearer picture of superior capsular reconstruction healing rates will become more known, and a follow-up article will likely be written to further describe these findings.

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References

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2. Denard PJ, Brady PC, Adams CR, Tokish JM, Burkhart SS. Preliminary results of arthroscopic superior capsule reconstruction with dermal allograft. *Arthroscopy* 2018;34:93-99.