# **Duke** University School of Medicine **Doctor of Physical Therapy**

### Background

- The prevalence of Ulnar Collateral Ligament (UCL) injuries in overhead athletes has risen exponentially in the past decade. • 25% major league pitchers report a history of UCL reconstruction
- (UCLR).
- UCLR is a common procedure to alleviate injury and improve return to play (RTP).
- There has been little research showing outcomes for athletes' return to same level of play (RTSLP).

#### Purpose

Previous studies have reported a RTP rate ranging from 73-94 percent to pre-injury level of performance after reconstruction of the UCL. The goal of this systematic review was to examine if overhead athletes with UCL injury return to competition following treatment and to what level they return.

### Methods

#### Inclusion Criteria

• Randomized control trials, prospective and retrospective controlled studies, overhead athletes, UCL injury

#### • Exclusion Criteria

• Not a research study, Non-human, Cadaver, Non-english, Injury to other UCL besides elbow, Injury to other area of body, Case study <10 subjects, Surgery to elbow not UCLR, No RTP criteria, Surgical technique article, Previous systematic or narrative/literature reviews, articles before 1999.

412 articles identified through PubMed (254), CINAHL (14), SportDiscus (38), and Embase (106)	9 titles/abstracts identified through hand search
421 titles included for sc	reening
421 titles screened	303 titles rejected because each did not reflect appropriate diagnosis or intervention
	.84 CI 95% (.7890)
118 abstracts screened	38 abstracts rejected for design, patient type, intervention
	.79 CI 95% (.6891)
80 full text articles screened	54 articles were rejected as a reflection of the exclusion criteria
	.86 CI 95% (.7498)
26 articles were included in the quality analysis	1 article was excluded based on modern modification

# Flow of Study Selection

# A Systematic Review Taylor Stern, SPT, CSCS, Jeremy McCullough, SPT, CSCS, Avi Bagley, SPT, NCSF, Derek Poulson, SPT,

# Return to Overhead Sport Following Ulnar Collateral Ligament Injury: Aaron Rygiel, SPT, Evan Vasilauskas, SPT, Dr. Michael Reiman, PT, DPT, OCS, SCS, ATC/L, FAAOMPT, CSCS

# Analysis

A Modified Down's and Black Risk of Bias assessment revealed 2 high, 4 moderate, 19 low quality studies. Inter-rater reliability (kappa) of .76 (CI 95% 0.68-0.83).

## Results

Downs and Black Scale Key								
<b>12-15</b> 10-11		8-9	6-7	0-5				
RTP and RTSLP for All Over	nead Athletes After U	CL Reconstruction						
Study	RTP Percentage (n)	RTSLP Percentage (n)	RTP Criteria					
Keller et al 2014	N/A	87% (146/168)	N/A					
liang and Leland 2014	97% (37/38)	79% (30/38)	N/A, statistically eva	luated				
Ford et al 2016	87% (13/15)	73% (11/15)	Success = 1 full sease	on				
Gibson et al 2007	N/A	82% (56/68)	N/A					
Erickson 2014	97% (174/179)	83% (148/179)	Pitched in any MLB g	game				
Makhni 2014	N/A	80% (118/147)	Active = 1 game; Esta	ablished >10 games				
Osbahr et al 2014	90% (231/256)	83% (213/256)	Conway Scale					
O'brien et al 2015	94% (31/33)	82% (27/33)	N/A					
Lansdown and Feeley 2014	79% (102/129)	N/A	N/A					
Erickson 2016	94% (80/85)	N/A	Conway Scale					
Jones et al 2014	91% (50/55)	87% (48/55)	Conway Scale					
Argo et al 2006	N/A <sup>1</sup>	N/A	Andrews and Carson					
Cohen et al 2011	67% (8/12)	50% (6/12)	N/A					
Azar et al 2000	N/A	81% (48/59)	N/A					
Cain et al 2010	N/A	83% (610/733)	N/A					
Park et al 2014	77% (13/17)	53% (9/17)	Conway Scale					
Dines et al 2012	90% (9/10)	90% (9/10)	Conway Scale					
Petty et al 2004	93% (25/27)	74% (20/27)	Success = RTSP					
Fotal	90.30% (773/856)	82.69% (1381/1670)						
[95% CI]	[88.14,92.11]	[80.81,84.43]						

RTP and RTSLP for All C	<b>Overhead Athletes After</b>	UCL Repair	
Argo et al 2006	94% (17/18) <sup>2</sup>	N/A	Andrews and Carson
Azar et al 2000	N/A	63% (5/8)	N/A
Cain et al 2010	N/A	70% (7/10)	N/A
Dodson et al 2010	N/A	100% (1/1) <sup>3</sup>	N/A
Savoie 2008	N/A	93% (56/60)	Andrews and Carson
Total	94.44%(17/18)	87.34% (69/79)	
[95% CI]	[74.24,99.01]	[78.24,92.98]	
	•		

RTP and RTSLP for All Ove	erhead Athletes After U	UCL Revision	
Liu 2016	N/A	65% (17/26)	/
Marshall 2015	84.8% (28/33)	65.5 (19/29)	1
Jones et al 2013	78% (14/18)	22% (4/18)	1
Dines et al 2008	60% (9/15)	33% (5/15)	(
Total	77.27% (51/66)	69.36% (163/235)	
[95% CI]	[65.83 <i>,</i> 85.71]	[63.20,74.90]	

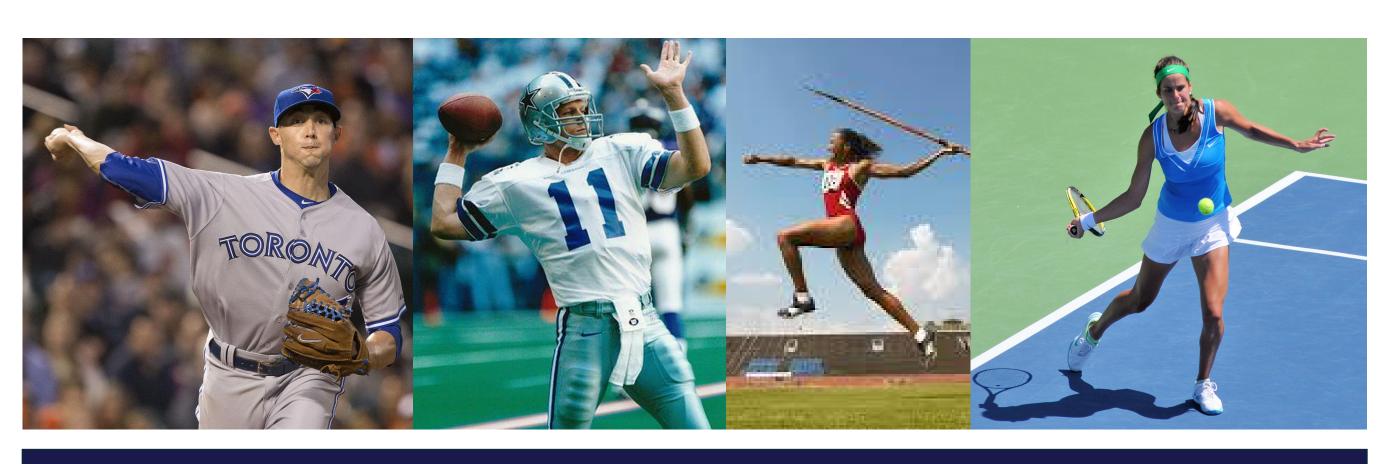
RTP and RTSLP for All Overh	ead Athletes After UCL	Nonoperative	
Ford et al 2016	93% (26/28)	93% (26/28)	5
Rettig et al 2001	N/A	42% (13/31)	0
Dodson et al 2010	100% (10/10)	N/A	٢
Total	94.74% (36/38)	66.10% (39/59)	
[95% CI]	[82.71,98.54]	[53.37,76.86]	
<sup>1</sup> = Only 1 reconstruction that is lumped with o	ther repairs, <sup>2</sup> = May include a reconstr	ruction, <sup>3</sup> = Most likely a repair	

• 25 articles met inclusion for the systematic review. Overall return to play after UCL injury ranged from 42-100%. • Of the 14 individual articles that include both RTP and RTSLP rates, 12 of them report lower RTSLP rates when compared to their ability to RTP.

Active = 1 game; established >10 games N/A - statistically evaluated N/A - statistically evaluated **Conway Scale** 

Success = 1 full season Questionnaire

N/A



### Results

		Innings Pitched		ERA			WHIP			
Study Subjects	Pre-Surgery Mean (SD)	Post-Surgery Mean (SD)	P- Value	Pre-Surgery Mean (SD)	Post-Surgery Mean (SD)	P- Value	Pre-Surgery Mean (SD)	Post-Surgery Mean (SD)	P- Value	
Keller et al 2014 <sup>1</sup>	n = 168	59.81 (4.61)	50.28 (3.92)	0.026	4.15 (0.13)	4.74 (0.14)	0.001	1.4 (0.03)	1.48 (0.03)	0.011
Jiang and Leland 2014 <sup>2</sup>	n = 28	NR	NR	0.001	NR	NR	0.9	NR	NR	0.18
Gibson et al 2007 <sup>3</sup>	n=54	97.1 (6.0-234.56)	70.17 (2.0-198.0)	0.003	4.12 (0.0-11.37)	4.21 (0.0-8.24)	0.14	1.362 (1.0-2.42)	1.356 (0.5-1.96)	0.83
Erickson 2014	n = 148	77.4 (51.7)	58.7 (47.2)	0.001	5.67 (4.01)	4.18 (1.36)	<.001	1.60 (0.567)	1.39 (2.52)	<.001
Liu 2016 <sup>4</sup>	n = 17	83.97 (NR)	36.95 (NR)	0.012	4.14 (NR)	4.89 (NR)	0.336	1.45 (NR)	3.1 (NR)	0.291
Marshall 2015	n = 33	67.18 (7.97)	39.10 (8.97)	<0.01	4.74 (0.34)	4.87 (0.42)	0.81	1.45 (0.07)	1.59 (0.08)	0.13
Makhni 2014	n=92	84.1 (NR)	89.3 (NR)	0.448	4.23 (NR)	4.63 (NR)	0.027	1.368 (NR)	1.432 (NR)	0.029
Lansdown and Feeley 2014	n=80	83 (55.5)	57.3 (50.1)	0.0001	4.75 (2.16)	4.73 (1.90)	0.94	1.48 (0.47)	1.45 (0.31)	0.6

surgery

- 88% of these showed a decrease in innings pitched was following UCL surgery
- 75% of these showed an increase in earned runs allowed (ERA) following UCL surgery
- 63% of these showed an increase in walks plus hits per innings pitched (WHIP) was reported following UCL surgery

# Conclusions

- There is tremendous variability in reporting of data and a lack of a standardized definition for returning to play after UCL injury.
- There needs to be more high quality studies done to analyze the return to sport outcomes in athletes that undergo UCL surgery.

# **Clinical Relevance**

• Stronger studies are necessary to provide understanding for the actual benefit of UCL surgery and prognosis for RTP & RTSLP.

## **Acknowledgements / References**

Conte, SA, et. al. (2015). Prevalence of Ulnar Collateral Ligament Surgery in Professional Baseball Players. American Journal of Sports Medicine. 43(7): 1764-9 Jiang, JJ, and Leland, J2M (2014). Analysis of pitching velocity in major league baseball players before and after ulnar collateral ligament

reconstruction. Am J Sports Med. 42(4): 880-885. Acknowledge Leila Ledbetter for help with the database searches





• Only 32% of articles investigated pitching performance post UCL