Burkhart S, Denard P, Tokish T and Brady P. Preliminary Results of Arthroscopic Superior Capsule Reconstruction with Dermal Allograft. Presentation SS-46 at AANA on May 19, 2017.

- Authors report on 31 patients with minimum follow-up of one year. Compared to preoperative values, forward flexion improved, pain decreased, ASES score improved, and SANE score improved. Five patients underwent revision. They concluded that: "arthroscopic SCR using dermal allograft provides functional improvement and patient satisfaction in the majority of cases. The preliminary results of this joint-preserving technique are encouraging in an otherwise difficult to manage patient population."

Burkhart SS, Denard PJ, Adams CR, Brady PC and Hartzler RU. Arthroscopic Superior Capsular Reconstruction for Massive Irreparable Rotator Cuff Repair. Arthrosc Tech. 2016 Dec; 5(6): e1407-18.

- Authors describe their SCR technique using acellular dermal allograft that they have been performing for 2 years. They have collectively performed more than 100 SCRs using dermal allograft in patients with massive irreparable cuff tears. They state "our early results give us reason to be optimistic that SCR with dermal allograft may be a joint-preserving alternative that is preferable to rTSA for patients with massive irreparable rotator cuff tears."

Adams CR, Denard PJ, Brady PC, Hartzler RU, and Burkhart SS. The Arthroscopic Superior Capsular Reconstruction. AJO. 2016 July/August:45(5):320-4.

- Authors describe their surgical technique for superior capsular reconstruction using ArthroFlex and "believe SCR is as a viable alternative" to reverse shoulder arthroplasty. They discuss that "reconstruction of the superior capsule has been shown to restore the normal restraint to superior translation of the humeral head and reestablish a stable fulcrum at the glenohumeral joint." "The short-term results of this novel procedure have been encouraging, including our own series of patients, in which most patients have had a significant reduction in pain, improvement in function, and very few complications."

Tokish JT and Beicker C. Superior Capsule Reconstruction Technique Using an Acellular Dermal Allograft. Arthroscopy Techniques. 2015 December 4(6):e833-9.

- Authors present their surgical technique for superior capsule reconstruction using ArthroFlex, as well as describe "an advantage of SCR is that it provides an option to restore and rebalance the force couples necessary for dynamic shoulder function and does not sacrifice any future treatment options." "The clinical outcomes at our institution are relatively short-term but have shown early promising results."

Hirahara AM & Adams CR. Arthroscopic Superior Capsule Reconstruction for Treatment of Massive Irreparable Rotator Cuff Tears. Arthroscopy Techniques. 2015 Dec:4(6):e637-41.

- This article describes an arthroscopic reconstruction of the superior capsule using ArthroFlex. The authors discuss advantages of SCR which include easy graft passage, reliable suture placement, and very strong repairs. They found this technique using a strong, thick dermal graft "allows for faster mobilization postoperatively" and "more accurate measurement and placement of the graft."

Petri M, Greenspoon JA, Millett PJ. Arthroscopic Capsule Reconstruction for Irreparable Rotator Cuff Tears. Arthroscopy Techniques. Dec:4(6):e751-55.

- Authors describe their surgical technique using ArthroFlex, highlighting pitfalls and pearls to the technique. They summarize that SCR "may be a reasonable treatment option in younger patients with irreparable posterosuperior rotator cuff tears wishing to avoid tendon transfer or reverse total shoulder arthroplasty."

Katthagen JC, Tahal DS, Millett PJ. Arthroscopic Capsule Reconstruction for Irreparable Rotator Cuff Tears. Orthopedics Today. 2016 Mar 36(3):13-15.

- Authors describe surgical technique using ArthroFlex and comment on their early results that are "18 months from surgery with excellent clinical and structural results." Postoperative radiographs show cases of re-centering of the humeral head. Patients note pain relief and return of function by 3 months post-op. Authors also report "no complications or adverse events."