

## Dr. Sayegh and colleagues respond to Dr. Garnavos

26 January 2010



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We thank Dr. Garnavos for his interest in our recent article (1) and we would like to make the following comments in response: We would like to congratulate Dr. Garnavos on his publication (2) and we share his enthusiasm for the significant recognition it subsequently received. It is true that we probably should have cited his article as well, and we apologize for not having done so. However, we cannot accept his accusations that we deliberately chose not to cite it. Although he briefly mentions it in his letter, Dr. Garnavos seems to miss the point that this (1) was a prospective randomized trial comparing three methods of reduction. We did not write a review article concerning the reduction techniques of anterior shoulder dislocation, we did not write a technical note on a new method of reduction, and we certainly made every effort to cite all relevant literature. Complaining for not citing his article is one thing.

Claiming that the FARES method of reduction (1) is similar to Dr. Garnavos' method (2) is a completely different issue. We do not claim any patency for our method but we do believe it is original, and we strongly encourage Dr. Garnavos to also read our response to Dr. Kerr's Letter to the Editor concerning that issue. Furthermore, we strongly disagree with Dr. Garnavos' statement "...that the only difference between the two techniques is the pendulum movement during reduction". The FARES technique is not a modification of Dr. Garnavos' technique. It is true that the FARES method and Dr. Garnavos' modification of the Milch's technique to reduce anterior shoulder dislocations share certain similarities. This is not at all unexpected, since abduction and external

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rotation maneuvers of the arm are frequently implied in most reduction techniques. This is probably the reason why our article's Figures 3 and 4 are similar to Dr. Garnavos' Figures 2 and 3 respectively. However, we cannot find any similarities between the remaining Figures (1 and 4) of Dr. Garnavos' article and our article's Figures 2 and 5. After carefully reading Dr. Garnavos article (2) we detected the following important differences between the two methods:

1. In Dr. Garnavos' modification of the Milch's technique (2) the elbow of the patient is initially flexed. In the FARES technique (1) the elbow is extended during the whole procedure.
2. In Dr. Garnavos' technique (2) the surgeon initially "...places his or her free hand on the patient's affected arm". In the FARES technique, the physician holds the patient's hand with both of his/her hands.
3. In Dr. Garnavos' technique (2) "...the traction must be increased gradually after the abduction has been achieved". In the FARES technique, gentle traction starts at the beginning of the reduction maneuver and before abducting the arm.
4. In Dr. Garnavos' technique (2) "...pressure on the head of the humerus, when necessary, should be applied with all the fingers...". In the FARES technique, pressure on the humeral head is never applied.
5. In Dr. Garnavos' technique (2) "...the surgeon pushes the humeral head back into the glenoid...". In the FARES technique, this is not done.

Last but not least, we believe that the "...so called pendulum movement during reduction" that Dr. Garnavos refers to is an important feature of the FARES reduction technique that helps achieving muscle relaxation rendering this new method less painful and more efficient.

#### References

1. Sayegh FE, Kenanidis EI, Papavasiliou KA, Potoupnis ME, Kirkos JM, Kapetanos GA. Reduction of acute anterior dislocations: a prospective randomized study comparing a new technique with the Hippocratic and Kocher methods. *J Bone Joint Surg Am.* 2009;91:2775-82.
2. Garnavos C. Technical note: modifications and improvements of the Milch technique for the reduction of anterior dislocation of the shoulder without premedication. *J Trauma.* 1992;32:801-3.