In total, 22 different combinations of diagnoses were observed. Mean age was 56 years.

**Conclusion** Patients with SAPS often present with concomitant shoulder diagnoses. The clinical importance of this remains uncertain, but the high prevalence underpins the need for further investigations on the role of concomitant diagnoses in relation to prognosis and response to current treatment paradigms.

**Introduction** Patients with subacromial pain syndrome (SAPS) are typically referred to physiotherapy as first line of treatment. Only half of patients get a satisfactory treatment outcome from this. Acromial morphology, poor scapular control, and impingement are pathophysiological factors associated with SAPS. These are expressed varying in SAPS-patients, and could be associated to treatment outcome. The aim was to investigate if acromial morphology, scapular control, and ultrasonographic impingement were associated with outcome from 3-months of treatment, in 69 patients were included in the analysis for scapular control, and after treatment. Potential confounders were addressed in linear regression, for an association to change in SPADI before and after treatment. Acromial morphology, scapular control, and ultrasonographic impingement were analyzed, through multiple investigations on the role of concomitant diagnoses in relation to prognosis and response to current treatment paradigms.

**Materials and Methods** Patients were referred to 3-months physiotherapy. Acromial morphology, scapular control and ultrasonographic impingement were analyzed, through multiple linear regression, for an association to change in SPADI before and after treatment. Potential confounders were addressed in the analyses.

**Results** 69 patients were included in the analysis for scapular control, 62 patients for ultrasonographic impingement, and 45 patients for acromial morphology. Acromial morphology was associated with poorer treatment outcome in both the adjusted and unadjusted model. The final model predicted a change in SPADI of 1.8 points per degree of increased acromial curve (more hook-shaped acromion). There was no association between scapular control or ultrasonographic impingement to change in SPADI.

**Conclusion** Acromial morphology was associated to the outcome after physiotherapy, with increasing acromial curve associated to poorer SPADI-scores. Ultrasonographic impingement and scapular control were not associated to treatment outcome. The exact relationship between acromial morphology and non-surgical treatment outcome needs to be explored further to confirm findings and determine the clinical implications.

**Tendinopathy and Testing**

**Introduction** Treatment of knee multiligament injury, revision ligament surgery, meniscus transplantation and advanced cartilage procedures is based on availability of allogenic connective tissue (grafts). A local tissue bank was established in 2014, and the 10-year experience with this bank is reported.

**Materials and Methods** The allograft bank was connected to an existing organ donor program. Age limit for donors was set to 50 years for tendons, 40 years for menisci and 30 years for hyaline cartilage. Tissue is handled and stored immediately, fresh frozen to -80 degrees Celsius (except hyaline cartilage, which is stored at 5 degrees Celsius). The donor is tested for contagious disease and the grafts are microbiologically cultured. With all results negative, the grafts are released. When thawed before use a swap is cultured.

**Results** Since June 2014 there has been 31 donations, resulting in 1160 grafts. 40 grafts (3.4%) had a positive bacteria culture and were discarded. Until April 2023, 552 recipients have been treated by use of these allografts: 175 knee multiligament reconstructions (Rs), 226 revision ligament Rs, 44 meniscus transplantations, 18 fresh cartilage transplantations and 81 other operations. All grafts had negative bacterial cultures in swaps obtained before thawing, and there were no recorded transplantation related complications. The expenses for local grafts were 20-25% of the price for grafts obtained from foreign banks.

**Conclusion** Through the established donation program it has been possible to secure optimal treatment for a number of highly specialized musculoskeletal conditions with high quality grafts and minimal costs.

**Improvement of EQ-5D-5L Outcomes after Non-surgically and Surgically Treated Hip Abductor Pathology: A Retrospective Study**

**Introduction** Insertional hip abductor tendon pathology (tendinopathy or tear of gluteus medius and/or minimus tendons (GMM)) are increasingly recognized as the main cause of lateral hip pain (LHP).

This study aims to evaluate the potential health-state benefits of a non-surgical plus/minus a surgical intervention in...