Background ISAKOS upper extremity committee has suggested a subclassification of Rockwood type III acromioclavicular (AC) joint dislocations in a stable type A recommended non-surgical treatment and an unstable type B recommended surgical treatment. The objective of this prospective cohort study was to investigate if this subclassification is clinically relevant.

Methods Inclusion criteria were patients aged 18–60 with acute AC joint dislocation and >50% superior displacement of the clavicle. Patients were treated non-surgically with 3-month and age 9–12 years participated in a data collection phase (within 70 ms) knee abduction moment (KAM) and the knee adduction moment (KAM) and the initial contact knee flexion angle (KFA).

Results Eighty-eight patients contributed data for the subclassification at 6w; 20 patients were classified as stable and 68 as unstable. There was a statistically significant but not clinically relevant difference in WOSI between the two groups at 6m; 20 patients were classified as stable and 68 as unstable if they presented with any of the two. The primary outcome was the Western Ontario Shoulder Instability Index (WOSI).

Conclusion The ISAKOS subclassification of Rockwood type III in a stable type A and an unstable type B is not clinically applicable. The presence of SD was associated with a worse result.

Introduction Most studies focusing on differences between males and females in children through to adulthood are cross-sectional in nature. The aim of this study was to prospectively examine kinematics during a drop jump (DJ) performance in male and female athletes, focusing on the knee at initial contact (IC).

Materials and Methods Athletes from local sports clubs (n=293, age 9–12 years) participated in a data collection where they performed a bilateral DJ (ten trials) while marker-based 3D motion capture was used to obtain kinematic data of each lower limb. A third of the patients (n=110) returned after five years and repeated the procedure. A mixed-model analysis of variance (ANOVA) for repeated measures was used for statistical analysis of knee angles in the sagittal plane at IC, using limb (right vs. left) and time (child vs. teen) as within subject factors and sex for groups. Alpha was set at 0.05 for significance.

Results Males increased the knee flexion angle at IC over time, while females leaned towards greater extension (interaction; p<0.001). Moreover, a significant 3-way interaction showed that while both sexes demonstrated inter-limb symmetry for knee flexion angles at IC as children, females increased asymmetry over time, while males did not (interaction; p<0.001).

Conclusion This prospective study demonstrates that age influences DJ performance and that changes for females, not males, generally move towards a more extended knee and greater asymmetry between limbs. This may have implications for knee injury and may be a target for intervention to lower injury risk.