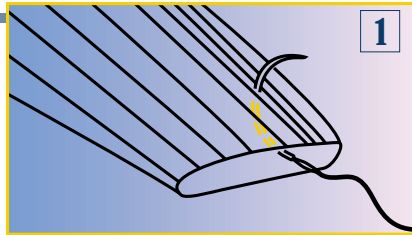


# IN THE Loop

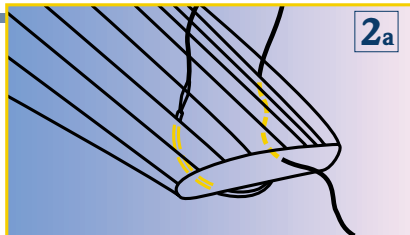
## Modified Mason-Allen Stitch

Important factors of an effective stitch in rotator cuff repairs maintain reliable pull-out strength without compromising damage to the underlying tissue during the healing phase. Tissue necrosis as a result of an improperly placed stitch has been shown to be a cause of failure in rotator cuff repairs.

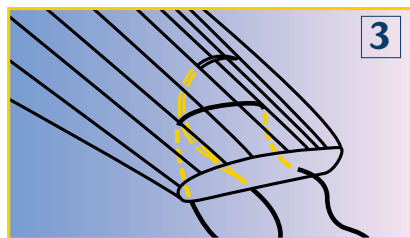
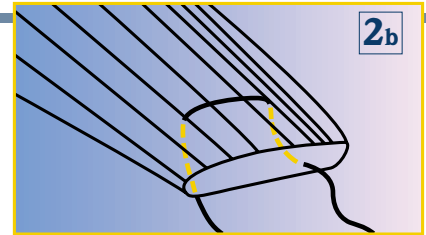
As noted in the literature, the Modified Mason-Allen Stitch has shown to provide the highest pull-out strength and potential least soft tissue injury when compared to a variety of stitches favored in rotator cuff repair.



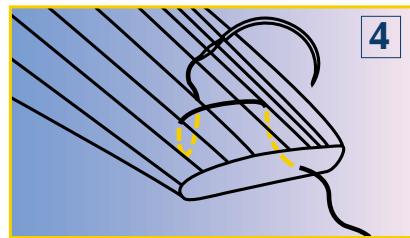
The entrance stitch is begun from the edge of the tendon exiting on its superior surface.



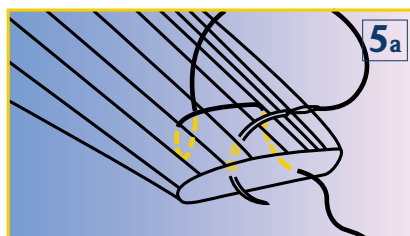
A throw is then made horizontally from the superior to the inferior surface of the tissue.



The needle is then passed from the inferior to superior surface of the tissue medial to the horizontal stitch.



The suture is finally passed over the top of the horizontal throw, creating a cruciate configuration.



This final maneuver serves to lock the suture within the tendon, creating superior pull-out strength.

