Thoracic Outlet Syndrome Objectified:
WHAT’S THE ISSUE?

• Especially for Neurogenic TOS (NTOS), until very recently no one has been able to agree on:
  – Basic terminology
  – Diagnosis
  – Treatment
  – Outcomes reporting

Thoracic Outlet Syndrome Objectified:
WHAT’S THE ISSUE?

• As a result, we have very little objective information regarding this problem.
  – Attitude of nihilism
  – Poor results
  – Large group of poorly treated patients (“these people are crazy”)

Neurogenic Thoracic Outlet Syndrome:
SOLUTIONS

• 2009: St. Louis Symposium (Thompson)
• 2013: Thoracic Outlet Syndrome (Illig, Thompson, Freischlag et al)
• 2016: SVS Reporting Standards (same)
Neurogenic Thoracic Outlet Syndrome: SVS Reporting Standards

• General goal:
  – To create consistent definitions of the syndromes and consistent reporting practices, so that we can meaningfully compare outcomes.


• Specific goals:
  1. Standardize terminology

NTOS, VTOS, ATOS
N, V, and A PMS
True versus disputed NTOS
Vascular versus nonvascular TOS


• Specific goals:
  2. Strictly define NTOS. Should have 3 of the 4 following findings:
     • Signs and symptoms of scalene triangle irritation
     • Distal neurologic signs and symptoms
     • Absence of other reasonable cause, and
     • Positive response to scalene block


• Specific goals:
  2. Strictly define NTOS. Most patients will have:
     • Prolonged symptoms (greater than 6 months)
     • Deterioration over time
     • A history of trauma

Neurogenic Thoracic Outlet Syndrome: SVS Reporting Standards

Specific goals:
3. Specify what must be reported in academic articles

Disability scale (0-10, continuous)
Pain scale (0-10, categorical)
QuickDASH
CBSQ

Unwritten gestalt:
- TOS should only be treated by those who are committed to better understand this syndrome at a fundamental level
  - Maintain a database
  - Use concepts and definitions agreed upon by the majority
  - Keep track of “objective” outcomes
  - Ideally report your results, at least exchange experiences