LETTER TO THE EDITOR

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Dear Sir,

I have read the article by Gumina et al., 'The morphometry of the coracoid process - its aetiologic role in sub-acromial impingement syndrome' [1]. The authors have concluded that the height and width ratio might have an influence on the occurrence of the impingement syndrome. There are other reports that accept the acromion type as a predisposing factor for the impingement syndrome (Type I straight, Type II curved, Type III beaked). There are no reported correlations on the changes that may occur during the ageing process to our knowledge.

We have performed measurements on the scapulae of 115 specimens [2]. Unfortunately, we did not have the humeral heads to correlate our results. But we were able

to measure the inner diameter of each scapula under the coraco-acromial arch to see whether the type of acromion influenced the volume. We used the center of the glenoid as the reference point and accepted the distance to the nearest bony prominence as the diameter. We found an inner diameter of 55.6 ± 5.14 mm (range 40–68 mm) that was not affected statistically by the acromion type.

I would like to learn from the authors if they had also correlated their findings with the acromion type. We think that all obstacles that limit the inner diameter of the coraco-acromial arch are liable to predispose the impingement syndrome [2].

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References

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2. Cezayir E, Ates Y, Ersoy M, Tekdemir I (1995) Morphometric anatomy of the acromion and the coracoacromial arch. *Acta Orthop Turc* 29:224–226 [in Turkish]