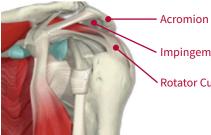
### INTRODUCTION

The rotator cuff consists of four muscles and their tendons, which surround the ball (humeral head) of the shoulder joint. The muscles fine tune the movements of the shoulder and help keep the ball of the shoulder joint in its socket.

The tendon of the rotator cuff passes through a narrow space between the top of the arm bone and a prominent bone on the shoulder blade (the acromion). The tendon is very vulnerable to being pinched here when the arm is moved especially above the head. Over time this pinching can lead to tears of the tendon. In other patients a rotator cuff tear can result from an injury such as a fall.



Impingement area **Rotator Cuff tendons** 

When repeated tearing occurs, the fabric of the tendon becomes weakened and finally, like the cloth at the knees of old trousers, splits. This leads to pain, which can be severe. Weakness of the shoulder can occur and often clicking and crunching on movement.

Other forms of treatment such as injection and physiotherapy are available but sometimes it is necessary to repair the tendon. How well this does will depend upon the size of the tear and the quality of the tendon tissue. If we think about the trousers again, the bigger the split in the cloth, the more difficult is the repair and the more likely the repair is to tear.







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# **ARTHROSCOPIC ROTATOR CUFF** REPAIR

# THE OPERATION

This is carried out under a general anaesthetic. The tendon is repaired by stitching it to the bone through keyhole surgery through a number of 5mm wounds. During the procedure the shoulder joint is filled with fluid which is gradually resorbed by the body over the following 2-3 days and this normal swelling resolves. The arm is then placed in a sling. Depending on the size of the tear the shoulder is immobilised for either 2 to 4 weeks. It is important to realise that it takes 6-12 months to derive full benefit from the surgery and that progress is gradual.

### **RISKS**

There is a small risk (<1%) of damage to nerves or blood vessels or infection. The surgery is successful in approximately 80% of patients. A small proportion of patients (<5%) develop stiffness of the shoulder following the procedure. The rotator cuff usually tears because it is degenerative "wear &tear" and cannot expect to repair as a normal tendon. As with any surgery there are also a small proportion of patients who fail to derive benefit from the surgery or require futher procedures.

### IMMEDIATE POST-OPERATIVE PERIOD

After surgery this shoulder may well be sore and you will be given painkillers to help this whilst in hospital. These can be continued after you are discharged home. Ice packs may also help reduce pain. Wrap crushed ice or frozen peas in a damp, cold cloth and place on the shoulder for up to 15 minutes. A sling which incorporates reusable ice packs is available from the physiotherapy department at the sports surgery clinic.

# **WEARING A SLING**

You will return from theatre wearing a sling. Mr.Mullett will advise you on how long you are to continue wearing the sling. This is usually for between 2-4 weeks depending upon the size of the tear. You will be expected to remove the sling for exercises only. Your physiotherapist will advise you of these.

# THE WOUND

This keyhole operation is usually done through a number of 5mm puncture wounds. The small incisions are covered with a number of waterproof dressings. This means that you can shower following surgery. The waterproof dressings can be removed after ten days after which time the wounds will have healed. No stiches need be removed. There will be no stitches only small waterproof sticking plasters. You can shower immediately after the surgery.

# DRIVING

Mr. Mullett will confirm when you may begin drivinggenerally after 4 weeks . You may be able to drive earlier if you drive an automatic.

# **RETURNING TO WORK**

This will depend upon the size of your tear and your occupation.

# **LEISURE ACTIVITIES**

This will depend upon the size of the tear and Mr. Mullett will help advise you on return to your normal activities.

# ARTHROSCOPIC ROTATOR CUFF REPAIR