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# **About Shoulder Arthroscopic Decompression**

# What is Arthroscopic surgery for Rotator Cuff Impingement?

The shoulder is a ball-and-socket joint, and the rotator cuff is the muscles and tendons that connect the shoulder blade to the humerus bone. The rotator cuff lifts your arm so you can reach overhead, and do sports like throwing and swimming.

Rotator cuff problems can cause pain, weakness and stiffness when the tendons impinge on the bone above them called the acromion. The pressure from the acromion can cause pain especially when lifting and throwing. This tendonitis and bursitis is called rotator cuff "impingement."

Many rotator cuff injuries improve with treatment such as medications, physical therapy exercises and injections. About a third of patients do not improve over time, and require surgical treatment. Surgery to smooth out the acromial spur and clean up the bursa is called Subacromial Decompression or Acromioplasty.

The surgery is performed using Arthroscopy (arthro=joint, scope= camera), a minimally invasive technique that allows us to look inside the shoulder to see exactly all that is injured or damaged. With small incisions there is less pain and trauma to the rest of the shoulder.

# Preparing for surgery

We'll have you stop certain medications before surgery, such as aspirin or anti-inflammatory medications (Ibuprofen, Naprosyn, Advil, Motrin, Celebrex, etc.) one week before surgery since they can cause bleeding. Depending on your age and medical history, we may have you see your regular physician and undergo some blood tests and an EKG before surgery.

# What you can expect on the day of surgery

The surgery is performed in an outpatient surgery center, which means you can go home the same day. We'll have you show up at the surgery center about one hour and a half before your surgery. The nurses will register you, shave and prep the surgery area, and place an IV and start the preventative antibiotics.

Arthroscopic Rotator Cuff surgery is done under general anesthesia, which means you will be completely asleep and then wake up comfortably after the procedure is completed. Most patients also have an additional nerve block, to help keep the shoulder numb and comfortable for about 12-18 hours after surgery. The anesthesia doctor will also talk to you before surgery to review your medical history and answer any questions.

After surgery is over, you'll remain at the surgery center for about an hour to wake up from anesthesia. A friend or family member will have to drive you home to be safe, and you'll need an adult to stay with you for at least the first 24 hours.



#### When you get home from surgery

We like patients to relax at home for about 1-2 days. You'll be able to get up a bit and go to the kitchen or bathroom, but it's wise to rest and relax for at least a few days. In order to start driving, you'll need to be off of the narcotic pain medications, and you have to be able to control a car safely.

You'll be given a sling to support the shoulder, but it is not required to keep in place. You can start gentle activities with the arm as you tolerate. You can start some gentle pendulum exercises after surgery {leaning forward to "stir the pot"), and some elbow motion exercises.

### **Recovery and Physical Therapy**

You will come back to see us in the office one week after surgery. At that visit we'll make sure your incisions are healing well and remove your stitches.

We'll arrange some supervised physical therapy to help restore flexibility and strength over time. Physical therapy (PT) progresses in stages. The first phase is just to work on range of motion exercises. After flexibility is close to normal, a light strengthening program will be started. This isn't heavy weight training, but specific rotator cuff and shoulder blade exercises to gradually restore shoulder function. Most patients have good range of motion and adequate strength by 4 to 6 months after surgery, and complete recovery may take even a year after surgery.

#### Getting back to work and sports after Shoulder Decompression/Acromioplasty

Getting back to work depends on the demands of your job. Sitting up for desk work can usually be started around a few days after surgery, especially if you can keep the arm at your side and use an ice pack at your desk. Before you can return to heavy work it will likely be 3-4 months. The same goes for heavy overhead sports or weight training.

In order to be able to return to sports and fitness, you'll need to take an active role in your rehabilitation to have good strength, endurance, flexibility and coordination. A strong commitment to rehabilitation is important to achieve a good outcome after shoulder arthroscopy. You will need to work consistently on the exercises you learn in physical therapy. Usually at about the 6 month mark, you'll have good flexibility and strength and will be able to gradually return to sports and fitness. It's always wise to incorporate the exercises you did in physical therapy as part of your own exercise program.

#### Long-term prognosis after surgery

After shoulder arthroscopy for decompression and acromioplasty, 80-90% of patients report good improvement in pain and function. About 10-20% of patients report persistent pain, which may be due to the degeneration in the tendon even if it's been given more room by smoothing out the bone spur. There are some patients who have persistent pain from other sources, such as the discs of the neck.

#### Possible risks and complications

All surgery has risks of bleeding, infection, damage to nerves and arteries, stiffness, blood clots, and persistent pain. These complications are uncommon after arthroscopic shoulder surgery.

A significant concern after rotator cuff repair is to regain full flexibility, and about 1-2% of patients have difficulty tolerating the physical therapy and require a second operation to break up the scar tissue.

The risk of severe complications from general anesthesia, such as death, heart attack or stroke, are very low, especially for patients with good general health.

# Questions?

If you have any questions, be sure to call us at 925-600-7020.