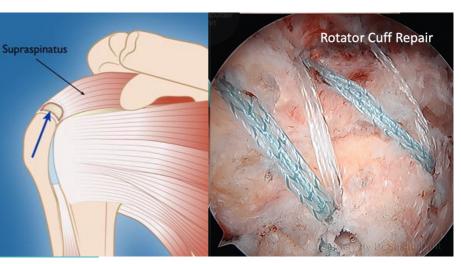
♦ MUNISON HEALTHCARE ORTHOPEDIC IN STITUTE

INFO ON

ROTATOR CUFF REPAIR



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Rotator cuff tears are one of the most common causes of shoulder pain. Four tendons blend together to make the "cuff" that rotates the shoulder. These tears are typically caused by trauma (acute) or degeneration (chronic). When these cause significant pain and dysfunction, repair is considered. The most common symptoms are pain in your deltoid region, trouble sleeping and weakness.

THE PROCEDURE

Rotator cuff repair is performed under general anesthesia. It's one of the most common orthopedic surgeries completed. The procedure takes about an hour. A regional block can numb your arm for a day or two and really help with pain after surgery. Antibiotics are given to decrease any chance of infection. A camera is inserted into the shoulder to evaluate the rotator cuff tear as well as any other problems such as arthritis or biceps tearing. Next, the tendon and bone are cleaned of any unhealthy tissue. The tendon is pulled down to the bone and suture anchors are used to stitch the tendon to bone. This is usually performed using arthroscopic "poke holes" around your shoulder. Small external sutures are used to close the small skin incisions.

RISKS AND BENEFITS

We always discuss risks and benefits when deciding what to do about tendon tears. The benefits of rotator cuff surgery are possibly decreasing your pain and improving your function. The outcomes with this surgery are generally very good. However, as with any surgery, there are risks. The most common issue is whether the rotator cuff tendon actually heals. This can be challenging. Other less common complications included infection, stiffness, continued pain, possible repeat surgery and medical issues amongst others.

ROTATOR CUFF REPAIR

PREDICTORS OF SUCCESS

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Retraction and size of the tear: how far away is the tendon from where it needs to go and how big is the tear? Increased retraction can lead to lower healing rates.

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- Biology: how healthy is the tendon, the bone and the individual? Age, smoking, diabetes as well as overall health play a role in this.
- O3 Muscle status: how does the actual muscle look? If it does not have much atrophy the healing rate is usually higher.

THE BICEPS

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One of the biceps tendons runs under the rotator cuff and many times can have tearing or dislocation as part of the problem.



During surgery it will be examined closely for any signs it may be causing you pain.

If it needs to be treated, the biceps can be lengthened with a tenotomy or shortened with a tenodesis.

RECOVERY



Patients typically go home the same day of surgery. A short period (~10–14 days) of taking pain medication is expected.



It takes six weeks for the cells of the tendon to grow to the bone. Your shoulder is usually immobilized during this time.



During the first six weeks, the elbow, wrist and hand should be exercised to decrease swelling and other symptoms. However, motion of the shoulder itself is not recommended.



Follow up appointments usually occur at two and six weeks after surgery. Your two week appointment is usually with Dr. Dubiel and at six weeks you see his physician assistant.



We typically recommend starting therapy around 6 weeks with a schedule to follow.

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Rotator cuff repair is a slow recovery. It can be very frustrating! Most individuals need some form of physical therapy for six months after surgery, and most people do not feel their best for at least a year (or longer) after surgery. In the end, if the cuff tendons heal, most individuals are very satisfied.

*For informational purposes only and shall not take the place a discussion with your surgeon.

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