ROTATOR CUFF REPAIR

Anatomy

The shoulder is a ball (humeral head) and socket (glenoid). The muscles act to elevate the arm. The large outside muscle is the deltoid and deep to that is the <u>rotator cuff</u> a combined tendon inserting into a prominence on the head called the greater tuberosity. Four muscles contribute to the rotator cuff tendon, the supraspinatus and infraspinatus being the ones to be torn in most cases.

Rotator Cuff Tears

These are fairly common, mostly due to degenerative (wear and tear) causes . In some , the cause may be due to impingement by the overlying arcromion or injuries.(falls, etc). The tendon always tears off its insertion site on the bone.

Symptoms Of A Rotator Cuff

Pain in the shoulder and down the outside of the upper arm, often worse at night. There may be increased pain and weakness when elevating the arm.

Surgical Repair Of The Rotator Cuff

In a number of older individuals the tears can be asymptomatic (pain – free)- these would usually not be operated. Tears can, however, enlarge with time, with muscle atrophy (withering away) resulting in an irreparable tear.

The Operation

We usually do this with an arthroscope (key hole surgery). Four tiny holes (3mm) are made around the shoulder for passage of the instruments. The bone is made raw to enable the tendon to heal to it. Bone anchors (tony devices with sutures attached) are drilled into the bone and the tendon is repaired to the bone with the sutures. Healing of the tendon to the bone takes around 6 weeks and even longer to strengthen- up to 6 months.

After The Operation

You can usually go home the next day or even on the same day. You will wear a sling for abut 6 weeks to protect the repair. During this time you will not be allowed to do active movements of the arm. The physiotherapist will instruct you how to do passive motion exercises- to lift the arm with other arm, thus keeping shoulder mobile without using the newly repaired muscle.

Post-operative Pain

You will have pain for a few days, for the first day or two it will be controlled with the nerve block, then with painkillers. For most people the pain is only moderate after the arthroscopic repair.

Prognosis (Success rate)

Ø 90% of patients become pain –free with normal function after a few months.