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**Shoulder and Knee Surgery  
Hip Arthritis Surgery**

## **ROTATOR CUFF REPAIR Frequently Asked Questions**

### **What is a Rotator Cuff Tear?**

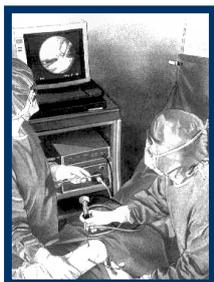
This is a tear of the tendons around the shoulder. The severity of the tear varies greatly. Some tears are small or only involve part of the thickness of the tendon. Others can be very large. Usually the larger the tear, the more likely it is that surgery will be needed.

### **Will I need an operation?**

This depends upon how severe your symptoms are.

Severe pain or loss of movement that does not improve with injections or physiotherapy indicates that surgery should be considered. Also, a tear that occurs following a specific accident usually needs to be repaired. Your treatment plan will be tailored to your specific symptoms and needs.

### **What happens at the operation?**



There are two parts to the operation. The first removes bone from the bony arch overhanging the rotator cuff muscle (the acromion). The second part of the operation involves re-attaching the muscle back onto the bone, usually using a 'wall plug' anchor with sutures around the tendon.

### **What is the Recovery Time?**



***Rotator Cuff surgery requires a long recovery time.***

It is necessary to spend 3 - 6 weeks in a sling, to allow the muscle to heal back onto the bone. Then it takes 3 to 6 months to regain strength and full movement in the shoulder.

Often, patients get pain around the shoulder blade related to 'trigger points'; this pain may need specific treatment.

### **How successful is the operation?**

This depends on several factors, in particular the size of the muscle tear and the length of time the muscle has been torn. As a guide 85 - 90 % of patients are very satisfied with the results of the surgery. Some massive tears cannot be repaired; but this is not common.

### **Are there any complications?**

Complications with this type of shoulder surgery are very unusual. The main complications are failure of the repair to “take”, and stiffness of the shoulder. The chances of these problems are greatly reduced by following the exercise program carefully. Infection and nerve damage are serious, but rare complications.

### **OTHER GENERAL NOTES REGARDING THE PROCEDURE**

- A sling is applied during surgery and kept on for 3 - 6 weeks (follow advice after surgery), but can be removed for showers.
- You may be discharged within one or two days after surgery, and it is usual for patients to independently carry out dressing, washing and self care. Patients may need some help with food preparation and household chores.
- Reviews will be carried out at 2 and 12 weeks. Exercises are explained in hospital by the physiotherapist and at these reviews. You will need to see a shoulder physiotherapist each week after the first month from the time of the surgery.
- There should be no driving for 6-8 weeks. You will need 2 weeks after the sling is removed to develop sufficient strength to control the car safely.
- There should be no lifting with this arm for 3 months and no heavy lifting for 6 months.
- Work depends on the environment. You can use your hand in the sling immediately, however there should be no reaching out or carrying. Most people can resume light duties by 6 weeks and normal duties (with weight limit) at 6 months.
- Sport such as golf - putting and chipping from 3 months, full game at about 6 months!