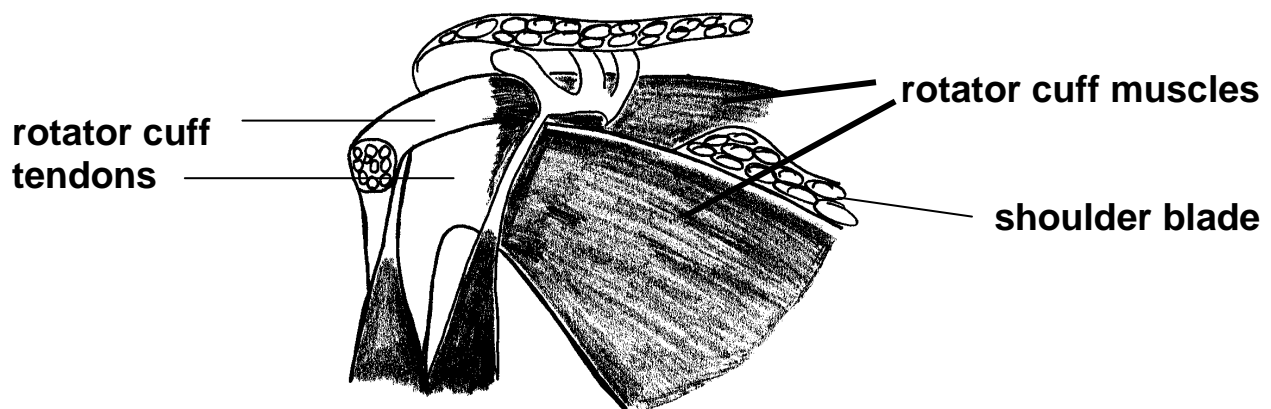


What is the rotator cuff?

The shoulder contains a layer of muscles called the rotator cuff muscles. These are 4 short muscles that are attached to a bone on your back called the shoulder blade. These muscles wrap around the shoulder and are attached to the arm bone by tendons. This group of tendons is called the rotator cuff. The rotator cuff helps you raise and rotate your arm. The rotator cuff also helps keep your shoulder joint moving smoothly.



What causes problems with the rotator cuff?

The rotator cuff can be injured in many ways. Some people have rotator cuff problems as they get older. This is caused by general wear and tear on the joint and aging. Some people have problems because of repeat motions such as overhead activities, throwing a ball, swinging a racket or swimming. You can also have problems after a heavy force tears the tendons. Some examples of this are lifting a very heavy object or falling right on the shoulder joint.

The rotator cuff has a very low supply of blood. This means that when it is injured, damaged or torn, it takes a long time for the pain to settle down.

Surgery is needed when the rotator cuff causes severe pain, weakness and you cannot move your shoulder. This is called a complete tear. A partial tear may also need surgery when treatments such as medication, steroid injections and physiotherapy have not helped.

What happens during surgery?

There are 2 ways to do the surgery. Your surgeon will describe what method you are having.

❑ Arthroscopy means that the surgeon makes three or more small incisions about 1 cm long around the joint. One incision is for the arthroscope that the doctor looks through. The other incisions are for the instruments to repair the tendon or injury.

❑ Open method means that the surgeon makes a larger incision about 10 to 15 cm long to repair the injury. Before open surgery, the anesthetist may give you a nerve block in your neck to decrease your pain after surgery.

For both methods, you will have general anesthetic which means you sleep during the surgery.

How long does this surgery take?

The length of time depends on what the doctor needs to do. The average time is about 2 hours.

What happens after surgery?

You will go to the recovery room where your blood pressure, pulse and circulation are checked. When you are fully awake and safe to move around, you will be taken to the Day Surgery Unit. If you are staying in the hospital, you will go to the Nursing Unit when ready.

Nausea

Some people have nausea after a general anesthetic. Tell your nurse so you can have medication to help.

Pain, discomfort and swelling

Before the operation starts, the anesthetist may put a thin tube called a catheter put in your neck to block the nerves in your shoulder. This helps decrease pain during and after surgery.

After surgery, you may also use a **Patient Controlled Anesthesia** pump or **PCA** for pain control. This pump gives you pain control medication when you push a button. It is a safe way for you to give yourself pain control medication when you need it.

When you no longer need the PCA or the nerve block tube, the nurse will give you oral pain control medication. Ask your nurse for pain control medication before you really need it. You should ask for pain control medication so you can do your exercises and therapy each day. The pain will lessen over time as you heal. Take your pain control medication before the pain gets too bad.

Use ice or cold packs to control pain and swelling. At home you can use cold packs or a bag of frozen peas. Throw the peas away after 5 uses.

Put the ice or cold packs on for no more than 20 minutes at a time. Do not put the ice or cold packs directly on your skin. Wrap them in a towel or cloth to prevent skin problems. Let your skin rest between cold treatments. In the first 24 to 48 hours after surgery, you should use ice or cold packs. If you have swelling after 48 hours keep on using ice or cold packs.

Positioning

When you are lying down, use 2 to 3 pillows to protect your joint. One to two pillows should be placed under the elbow and one across your chest. This decreases stress on the joint so it can heal.

Sling or other support

You will wear a sling when you are up. When your arm is in the sling, your hand should be higher than your elbow. You may or may not take the sling off in bed. Your surgeon will tell you what you to do. Be sure to support your arm with pillows.

Use the waist strap that comes with the sling if your surgeon tells you to. The physiotherapist or doctor will tell you when to stop using the sling.

Looking after the incision, dressing and bathing

For Open Surgery:

You will stay in the hospital overnight. The nurse will check your incision while you are in the hospital and change the dressing when needed. If you have a drainage tube, the nurse will check and empty it. The drainage tube will be removed before you go home.

The incision is closed with staples or stitches and covered with a light dressing. You can take a bath if you are able to get in and out of the tub and bathe without getting your dressing and incision wet. Most people bathe at the sink.

The dressing is left in place until you are seen in the Orthopedic and Arthritic Clinic about 2 weeks after surgery. The staples or stitches are taken out 10 to 14 days after surgery. These will be removed at your follow-up appointment in the Orthopedic and Arthritic Clinic at St. Joseph's Hospital.

You can shower 10 days after surgery and the incision is healed. Pat the area dry with a soft towel.

For Arthroscopy:

You will go home the same day. The incisions will be closed with small paper tapes. You may also have a light dressing over this. Leave the paper tape and/or the dressing on until 5 days after surgery. You can shower after 5 days and the incisions have healed.

Activity

✘ Do not lift anything. For example, you cannot lift your arm to brush your teeth or hair. Your shoulder needs time to heal. This will take at least 6 weeks. ✘ Do not lift anything until your doctor or physiotherapist tells you to.

Dressing

Dress your operated arm first and undress it last. An occupational therapist may be asked to see you if you need help dressing.

Exercises

For Open Surgery:

When you are in the hospital, a physiotherapist will start you exercising the day after surgery. You will learn the exercises to do and how often to do them. You will begin with exercises that help you move the right way.

Do your exercises lying down with your sling off. Be sure to follow the steps your physiotherapist gives.

Be sure you talk to the physiotherapist before you leave the hospital. Be sure you know what exercises to do at home.

For Arthroscopy:

You will be in a sling. You will be able to either move your arm right away **or** not be able to move your arm for 3 to 4 weeks after surgery.

Your doctor will then tell you when and how to start moving your arm. Follow any written instructions your doctor gives you.

At Home after Rotator Cuff Surgery

Household hints

You may want to use a wheeled cart to carry items rather than lifting items with one hand.

Driving

Your surgeon will tell you when you can start driving again.

Return to work

This will depend on the type of job you do. Talk to your doctor about when you can return to work.

Exercises

6 to 12 weeks after surgery you will be ready to begin exercises that strengthen the shoulder muscles. The physiotherapist will arrange outpatient physiotherapy for you if you come to St. Joseph's Hospital. You will be contacted by telephone for an appointment as soon as possible.

You can decide to go to another place for physiotherapy. In this case, you will get a referral from your surgeon and arrange your own appointments.

Follow-up with surgeon

Before you leave the hospital, you will be given an appointment to see your surgeon in about 2 weeks. This may be in the surgeon's office or at the Orthopedic and Arthritic Clinic at St. Joseph's Hospital.

Sexual activity

You can return to sexual activity when you feel comfortable. Avoid any position that puts stress or pressure on your operated arm.
✘ Do not lean on your shoulder or elbow for the first 2 months after surgery.

Contact your doctor if you notice:

- pain that does not get better with medication or over time
- swelling that does not lessen over time
- yellow or green drainage discharge from any incision
- increasing redness around incisions
- fever
- shortness of breath
- lower leg or calf pain

Your doctor may give you written instructions to follow.

Be sure to follow these and if you have any questions, contact your doctor.

