

Fully Torn Rotator Cuff Repair

A torn rotator cuff is a common condition that can cause shoulder pain, weakness, and loss of mobility. If the tear is severe enough, surgical intervention is often necessary to repair the rotator cuff and to restore shoulder function.



ORTHOPEDIC SPECIALIST





Introduction

A torn rotator cuff is a common condition that can cause shoulder pain, weakness, and loss of mobility. If the tear is severe enough, surgical intervention is often necessary to repair the rotator cuff and to restore shoulder function.

Doctor's Personal Note: A Message From Dr. Pevny

Thank you for visiting my website and viewing the 3D Animation Library. These animations should assist you in better understanding your condition or procedure. I look forward to answering any additional questions you may have. Please make an appointment by calling (970) 544-1289.



Anatomy

There are three bones that are involved in the shoulder: the humerus, the scapula, and the clavicle. The rotator cuff is made up of a group of four tendons and muscles that surround the shoulder joint. These muscles are the subscapularis, the supraspinatus, the infraspinatus, and the teres minor, and together they work to stabilize the joint and move the arm. A fluid-filled sac or bursa protects the tendons of the rotator cuff and allows them to slide smoothly as the arm moves.



Rotator Cuff Tears

Rotator cuff tears occur when at least one of the cuff tendons is torn, fully or partially detaching the muscle from the humerus. These tears are most commonly caused by either cumulative injury through repetitive motion such as in throwing sports and weight lifting, or by a sudden or acute injury such as a fall. There are two main categories of rotator cuff tears: partial tears and full tears; this animation discusses the repair of a fully torn rotator cuff. Please see our Partially Torn Rotator Cuff animation for additional information.

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Surgical Repair Options

Surgical repair techniques vary depending upon your surgeon's preference, the severity of your tear, the tissue quality, and your individual anatomy. These techniques include open repair, miniopen repair, and arthroscopic repair. This animation will explain the common arthroscopic repair.



Procedure

Depending upon your preference and that of the anesthesiologist, you will be put under general anesthesia and/or a nerve block.

Your surgeon will make one or two small incisions around the shoulder joint. Next, a cannula will be inserted into the incision and saline solution will be injected in order to expand the joint to allow the placement of a small camera or arthroscope, and surgical instruments.

Once placed, the arthroscope will display images onto a video monitor and your surgeon will use these images for guidance during the procedure.

In order to provide more room to protect your repaired tissue, many surgeons will remove bone spurs from the underside of the bone above the joint, known as the acromion, which is part of the scapula.

Your surgeon will remove severely damaged or scarred tissue from your torn tendon. Implants called suture-anchors are then placed in order to secure the repaired tissue to the bone. Your surgeon will then pull the tissue over the top of the head of the humerus for reattachment.

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Recovery and Results

Typically, arthroscopic rotator cuff repair is performed in an outpatient facility and you should be able to go home the same day. Pain and swelling after the procedure is normal and will decrease over time. You may be prescribed medication to manage your pain for the first few days and as needed. Depending upon your specific needs, your surgeon and physical therapist will develop an exercise routine to gradually increase your range of motion and strength. Complete recovery can take from four to six months depending upon the severity of the tear, the type of repair, and your individual healing progress.

Patients typically experience high satisfaction with rotator cuff repair, and in combination with physical therapy, many people experience significant pain reduction and recover much of the lost function of the shoulder.



QUESTIONS FOR YOUR DOCTOR

- 1. What guidelines should I follow prior to my procedure? Will I need other tests or evaluations before the procedure?
- Which type of repair will you perform and why is it the appropriate procedure for my condition?
- 3. What will happen if I don't undergo the procedure now?
- 4. How long will the procedure last and will I be under anesthesia?
- 5. Will I have dressings, bandages, or stitches after surgery? When should they be removed?
- 6. Will I be given medication after surgery? What tips do you have for me to ease discomfort?
- 7. How long of a recovery period can I expect, and what kind of help will I need during my recovery? Are there special instructions for eating, sleeping, or bathing?
- 8. When can I return to work, resume normal activity, drive, and exercise?
- 9. Will I have scars? Are the results permanent?
- 10. Will I need physical therapy?