

ROTATOR CUFF POST OP INFORMATION

We have completed the surgery and now move on to the recovery phase of your treatment. Below is a guide to prepare you for what is in store with answers to the most commonly asked questions.

The surgery is typically done with both a general anaesthetic and a nerve block. The nerve block involves injecting local anaesthetic around a leash of nerves in your neck. When you wake up your whole arm will be numb. You have not had a stroke – it is the nerve block working. It typically provides very good pain relief for 8-16 hours after the surgery. You will typically feel sensation return, starting from your fingertips and then moving towards the shoulder. The block can occasionally affect the ability of the diaphragm on that side of your lungs to be weak and this can make people feel breathless. Let your nurse know if that is the case and we will keep some oxygen running overnight. Rarely the pupil in the eye on the side of your surgery will dilate (get bigger) and this may cause some mild blurring of vision. These issues will cease once the block has worn off. Until the block has completely work off you must not remove the sling.

I will check in on you the day after your surgery but if your pain isn't too bad you can go home the day after your operation. For the first 6 weeks after a rotator cuff repair you will need to wear a sling (including whilst sleeping). From the day after your operation I want you to start finger and wrist movement exercises. A squeeze ball is good – use it in the same hand as your operated shoulder. You can loosen the sling off 3-4 times a day to allow your elbow to straighten – **as long as your elbow is touching your side** you are not at risk of damaging the cuff repair.

For the first 2 weeks your pain management is as follows:

1. Regular paracetamol or panadol osteo (breakfast, lunch and dinner)
2. Anti-inflammatory (ibuprofen 400mg breakfast, lunch and dinner) OR meloxicam 7.5mg (breakfast and dinner)
3. Endone 5mg every 6 hours as required – use as much of this as you need BUT AS LITTLE AS YOU CAN

The dressings on your wounds are waterproof and generally work well. You can shower once a day but have the water hitting you from the opposite side. If the dressings do get wet underneath, or fall off, replace them with some waterproof ones from your local chemist or call my rooms and I can provide some.

Sleeping is often an issue after rotator cuff surgery. Most patients report feeling more comfortable if they are semi reclined or propped up a bit. If you have a recliner use it. If not use an extra couple of pillows. You can also take an over the counter sleeping tablet such as restavit. This is an anti histamine. Some people get quite a hangover effect from this medication so start with half a tablet and see how you go. You could safely use a full tablet a night for the first couple of weeks after your operation if it works and it is not giving you any side effects.

I will catch up with you at the 2 week mark post-op. This appointment is to check your wounds, to make sure your pain is adequately managed and to discuss the surgical findings.

ROTATOR CUFF POST OP INFORMATION

Usually I start very gentle shoulder therapy after this appointment. From weeks 2-6 you should continue hand, wrist and elbow range of motion exercises. You can also start (provided I give you the all clear) PASSIVE shoulder range of motion and pendulum activities with the guidance of your physiotherapist. Passive movements are ones where you are not lifting your arm yourself – the therapist, your partner, your other arm or a pulley system is doing the work. The function of these exercises really is to keep things moving so you don't get too stiff. Occasionally for large or massive tears I will delay the start of passive range until the 3 or 4 week mark.

After 6 weeks you can start to wean the sling and start using the arm more. From weeks 6 to 12, I set a somewhat arbitrary lifting limit of 1kg with the affected shoulder. Start reaching for the cup on the high shelf, washing with the operated arm etc. This 6 week period is all about trying to regain as much motion as possible without stressing the repair site with resistance activity. You can drive once you can comfortably lift your arm to shoulder height and hold it there – usually this is at the 7 or 8 week mark post op. If you don't think your reaction a time/ability is back to normal don't drive a car – please be sensible about this. Swimming is resistance, so unfortunately no swimming until 12 weeks. By the 12 week mark we aim to get about 140 degrees of elevation. Don't expect full motion by 12 weeks – if you get it that's great – but that is relatively uncommon.

After 12 weeks we begin resistance work. Unusual clicks, catches, aches and pains around the shoulder are very common until you are about 6 weeks into the resistance phase ie. 4 and a half months post op! Don't worry, these go away once your strength returns and the ball and socket recentre. Remember the muscle was not attached for some time pre surgery and then we rested it for another 3 months so it takes time to get the strength back. Once you have near full range of motion you can start doing some freestyle. Once you can swim a few hundred metres comfortably you can get back on your big surfboard in small surf if you enjoy this form of recreation. If you are a golfer you can start putting after 8 weeks. You can start working on your long game after 14 weeks but tee the ball up, don't hit out of long grass or bunkers and very gradually increase your backswing. If you have any other sports specific questions please ask.

About 85-90% of the recovery happens over the first 6 months. People improve post rotator cuff surgery out to 18 months. It's a big chunk out of your life but almost invariably the results are worth it.

Regards,
Luke McDermott.