

Arthroscopic Subacromial Decompression Information

Below is some information regarding your operation, which is intended as a guide. Please read this. For any further clarification, or if you have any queries or issues, please contact my rooms as soon as possible on 9389 3855 or email: spenceradmin@hogwa.com.au

With kind regards,

Jonathan Spencer

Soft Tissue Shoulder Surgery: Risks and Benefits

Aim of Surgery

- Reduce shoulder pain
- Improve shoulder function
- Improve overall quality of life and mobility

Overall success rate: 95%

What to Expect

- 1-2 days in hospital
- 2 weeks of swelling and discomfort requiring significant pain killers
- 3-5 days in a sling (or 4-6 weeks if repairs are performed)
- 6-12 weeks for reasonable recovery
- 6-12 months for a good to full recovery

Risks

- 5% chance of minor complication
- 0.5-1% chance of serious complication
- Risk of dissatisfaction with the outcome of surgery

Possible Complications of Surgery

- Wound infection
- Deep joint infection
- Fracture
- Nerve injury
- Revision surgery
- Heart attack
- Chest infection
- Pulmonary embolism

Post Operation Wound Care

- Keep wool and crepe bandages on for 24 hours after the operation.
- Keep wounds clean, dry and covered for 2 weeks or until the wound is completely healed. If the dressings get soaked through, they will need to be changed.
- Do not soak the incision (i.e. bath or pool) until the wound is completely healed.
- Mr Spencer mainly uses dissolvable stitches.
- If you have any concerns about your wound, please contact Mr Spencer's rooms.

After your Arthroscopic Subacromial Decompression:

A Rehabilitation Guide

All exercises performed should be **within pain and comfort**. Every shoulder progresses differently. Listen to your shoulder and discuss any concerns with Mr Spencer or your Physiotherapist.

Notes in italics below are guidelines intended for your Physiotherapist.

If your operation involves a **tenodesis** of your biceps tendon (where your biceps tendon is reattached), you are to **avoid lifting anything heavier than a cup of tea for 6 weeks** and **avoid heavy lifting** (or overstressing the biceps) within the first **3 months**.

Weeks 0-2

- **Sling** for 2-5 days, maintain elbow extension (straightening) range whilst in sling.
- Ensure adequate analgesia to control pain.
- **Driving** when you feel safe and competent to do so and you must be out of the sling. Approximately 1 week after the operation. Contact your insurance company before returning to driving to ensure you are covered.
- **Exercises**: Pendular circles, Range of movement all directions, strength, proprioception, scapular stabilisation exercises as able within pain and comfort.

Week 2 onwards

- Return to **light duties** at 1-2 weeks, avoid lifting 2-4 weeks. This is highly dependent upon your type of job and your shoulder. If required, discuss this further with Mr Spencer.
- Improvement in your shoulder can continue for up to 1 year.
- **Exercises:** continue range of movement, progress strength, proprioception, scapular stabilisation exercises as able within pain and comfort.
- Painfree Rotator Cuff strengthening exercises. Avoid supraspinatus exercises initially and then only if weak and must be painfree with good scapular control
- Work/leisure/sport **specific rehabilitation** including progression to overhead control and strength.
- If a **Biceps Tenodesis** is performed, introduce a gradual strengthening programme for the Biceps from 12 weeks onwards.