

# Shoulder Problems:

## Trauma, Sports Injuries or over use - Minimally Invasive Arthroscopic Surgeries & their Rehabilitation

In our day to day life, most of us do encounter Shoulder Problems such as persistent pain, decreased/restricted movements. Frozen Shoulder, Instability - Dislocations & Arthritis, which hinder our life style & activities of daily living.

Shoulder joint is formed by the articulation of the glenoid & the humerus Head, Stabilised by the rim of labrum & group of muscles which help in stabilisation & movement in different planes & direction.

### Common Conditions encountered:

#### Rotator Cuff Tear

Rotator cuff is a group of muscles & their tendons form a cuff over Shoulder Joint. They hold the Joint & help in the movement in different directions. They are torn due to over use or Trauma.

#### Impingement Syndrome / Stiffness - Frozen Shoulder

It can be due to inflammatory response, post trauma, our bony spur, which causes pain & severe restricted movements. Even the Activities of Daily Living are hindered combing -bathing etc. Most commonly seen in Diabetics.

#### Instability & Recurrent Dislocations

The labrum which reinforces/stabilises the Shoulder, may be torn in Bankart's & Slap lesions. In Bankart's the tear is in the lower part & Slap in the top part of the Shoulder Joint.

In Arthroscopy of the Shoulder, 3 - 5 portals of about 5mm are made for the visualisation (Seeing) & the working (Repair/Reconstruction) will be done through the same portals. A scope will be introduced to see in the Joint & with the help of shaver debridement (cleaning) will be done & with the help of specific instrumentation repair will be done.

In Impingement, the inflammatory tissue & adhesions are debrided and a free space is created for the better, pain free movement of the Shoulder. Using a bony spur (overgrowth) & Joint decompression will be done

In Rotator Cuff Tears, the chronic torn part will be debrided & the torn part of the tendon is pulled back to its insertion/foot print & fixed over there with the Suture Anchors - which can be bioabsorbable or Metallic (Titanium), will be followed by the rehab protocol for the strengthening of the group of muscles

In Instability, either the injury to the labrum can be at the top (superior) - SLAP or towards the bottom (BANKART) - More common, because of them injury the stability of the Shoulder is lost & becomes more prone for dislocation as the patient will be feared of dislocation with the certain activities or over head activities. Thus the portion of the injury/tear has to be reconstructed using the Suture Anchors & has to be stabilised for the better functionality.

Arthritis is one condition which is pretty rare in the Shoulder Joint, if in the early stage Debridement can be done & if there is an anatomical deformation with the change in the shape of the head, replacement would be the final go in severe Arthritis. For a pain free & better movements with stable joint

All Shoulder rehab with reconstruction repair will be started with gentle assisted range of movements followed by the active range of movement exercises & the strengthening exercises

depending on the severity of the case & the amount of repair done. The Rehab protocol may vary from 1 to 6 months, even based on the needs of the patient

To get back to work - office/house hold - 4-6 weeks time

For Driving or riding - 6-8 weeks

For getting back to sports - around 6 months

With the advent of the science, Instrumentation & Minimally invasive arthroscopic techniques, recovery has been fast & rehab has been more quicker with less scarring.



### Dr. Kirthi Paladugu

Joint Replacement &  
Arthroscopy Surgeon, Sri Kara Hospitals

**EHS FACILITY AVAILABLE**