

Arthroscopic subacromial decompression of the shoulder



Physiotherapy Department

Information booklet for

Name of Patient: _____

Date: _____

Name of Physiotherapist: _____

Telephone: 01483 464153 _____

This leaflet is designed to help prepare you both mentally and physically before you come into hospital for your shoulder surgery.

Please read this booklet carefully and ask your pre-assessment nurse or physiotherapist if you are unsure about any information or instructions.

Remember once you have had your operation it is up to you, with guidance from your physiotherapist, to follow the precautions and to carry out the exercises regularly in order to achieve the optimum results.

What is arthroscopic subacromial decompression of the shoulder?

Arthroscopic subacromial decompression of the shoulder is a surgical procedure that may be performed when there is impingement of tendons around the shoulder joint. This results in a painful shoulder during certain movements.

Surgical treatment consists of creating more space immediately around the tendons so relieving pressure off the inflamed structures. The procedure is performed through an arthroscope (a small telescope inserted into the joint).

Following surgery the swelling usually settles after some time but it may take three months or more for recovery to occur.

What is the expected outcome?

The eventual end result should be a shoulder with reduced pain on movement.

What are the complications that might occur?

Complications are rare but as with all surgery do exist.

They include infection, damage to adjacent nerves or failure to achieve sufficient decompression.

Is there any alternative treatment?

Non operative treatment includes physiotherapy and cortisone injections.

Your stay in hospital

You may stay in hospital overnight after surgery and you will need someone to escort you home. You will go home with your arm in a sling. You may find loose fitting clothes more suitable to wear initially.

What happens during and after the operation?

The operation is usually performed under a combination of a general anaesthetic to put you to sleep and a local anaesthetic to temporarily numb the arm.

You will return to the ward with your arm in a sling. This is worn for comfort for a few days after which it can be discarded.

A structured physiotherapy programme commences from the first day initially consisting of specific exercises to gently move the shoulder. This is gradually progressed until good movement and strength are obtained.

First day

On the day after your operation you may remove your sling for washing and dressing and to start your exercises. These you will need to practice at regular intervals throughout the day whilst in hospital and when you go home until good movement is obtained.

Be guided by your level of comfort. The aim is to prevent the shoulder from getting stiff whilst allowing it to recover from the trauma of surgery.

Ice

Use Ice packs to help reduce pain and post operative swelling.

Wrap 1 large pack of frozen peas or an ice pack in a tea towel and place over the shoulder.

Leave for 15–20 minutes. Repeat 3–4 times a day.

Replace the ice pack in the freezer to use only on the shoulder again.

Do not use ice if you have circulatory or sensation deficits.

Exercises

Aim to complete the exercises below 3-4 times a day.

Pendular exercise:

1. Remove sling.

Lean forwards, supporting yourself with your non operated arm let your operated arm hang down.

Try to bend at the waist so that your arm can hang forwards with your elbow straight as far as is comfortable.

Gently circle your arm from the shoulder keeping your thumb pointing forward for 1 minute.

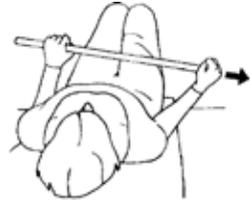


2. Shrug your shoulders up and backwards in smooth circular movement.
Repeat 20 times.

3. Lying on your back, lift your operated arm with your other arm towards your head. You are aiming over the next few days to get your arm up above your head.
Repeat 10 times.



4. Lying on your back with your operated arm by your side and elbow bent to 90° use a stick in both hands to push the operated arm outwards.
Repeat 10 times.



When you leave hospital

You may be given an appointment to begin physiotherapy about 3 weeks following the surgery.

They will progress your exercises and see you again as required.

Stitches if used will be removed between 10 and 14 days at your GP's surgery. If stitches are not used but steristrips are under the dressing you may peel these off, ten days after the operation. The nurses will advise you before you go home. The wound will have to be kept dry and protected until it is healed. If it becomes red, inflamed or oozes contact your doctor immediately.

An appointment will also be made for you to be seen by the surgeon's team in clinic.

Driving

It is best to avoid driving for 2 or 3 weeks after the operation. You must feel comfortable and be able to safely drive before you resume. You are advised to check with your insurance company before you begin driving again.

Work and sport

You can return to office based work in a few days when the arm is comfortable.

Light manual workers (light lifting below shoulder level) will be unable to return to normal duties at work until about six weeks.

Heavy manual workers (lifting above shoulder height) should not resume normal duties for about three months.

If you are unsure as to when to resume work or leisure activities please discuss this with your surgeon or physiotherapist.

If you have any further questions

Once you have returned home if you have any further questions or concerns please telephone the ward. They will do their best to help you or direct you.

This booklet is intended as a guide and a reminder. All points will be covered by your physiotherapist during your stay in hospital and your outpatient physiotherapist when you start treatment. Each patient's individual needs vary and so you will be guided personally through your rehabilitation.

Reference source(s):

www.guildfordupperlimb.co.uk

Contact details

Royal Surrey County Hospital

Telephone: 01483 571122

Physiotherapy

Telephone: 01483 464153

PALS and Advocacy contact details

Contact details of independent advocacy services can be provided by our Patient Advice and Liaison Service (PALS) who are located on the right hand side as you enter the main reception area. PALS are also your first point of contact for health related issues, questions or concerns surrounding RSCH patient services.

Telephone: 01483 402757

Email: rsc-tr.pals@nhs.net

Opening hours: 9.00am–4.00pm, Monday to Friday

If you would like information documents in large print, on tape or in another language or form please contact PALS.

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