Rotator Cuff Repair: A Guide to Recovery After Surgery

What is a Rotator Cuff Tear?

The Rotator Cuff is a group of four muscles & tendons that move the arm in space. The rotator cuff tendons insert or attach to the top of the arm bone, the humerus, in the shoulder joint. A rotator cuff tear means that the tendon has torn. The most common way that the tendon tears is by detaching from the top of the humerus bone. Some tears are small with just one of the tendons being torn but there can also be very large tears involving 3 or even 4 of the rotator cuff tendons. Some patients with rotator cuff tears have little or no pain. Surgery is not recommended for these patients. If you have significant pain or have had a sudden or 'acute' rotator cuff tear, your surgeon may recommend surgery to repair the rotator cuff tear to reduce the pain in your shoulder.

What Happens During Rotator Cuff Repair Surgery?

During the surgery, a lighted telescopic lens called an ‘arthroscope’ is inserted directly into the shoulder joint to see what is happening in the joint. Several small cuts are made in the skin in order to place the arthroscope and surgical instruments. The joint will be examined and some parts of the repair or clean up may done as ‘key hole’ surgery with the arthroscope. More commonly, the arthroscope is removed and the skin is cut to do a ‘mini-open’ rotator cuff repair.

To repair a torn rotator cuff, the tendons must be freed up from scar tissue and then sutured back down to the bone where they were before the tear. Then, the tendon repair must be protected to allow the tendons to heal. If the repair is stressed too early, before healing has taken place, the repair will fail and then tendons will tear again.

Rotator cuff surgery is performed in the operating room under most commonly under general anesthesia ‘going to sleep’ but sometimes also with block anesthesia ‘freezing the arm’. The surgery typically takes between 1-2 hours.

How Long Does Recovery From Rotator Cuff Surgery Take?

For the first 6-8 weeks after surgery, your surgeon will ask you to wear a sling to protect the repaired tendons. The next phase of recovery, from 8-12 weeks after the surgery, is focused on getting the shoulder to move normally again, while still not doing any lifting that could pull apart the repair. Around 3 months after surgery, you will start strengthening exercises.

Most of the recovery is complete around 6-9 months after surgery, but there can be improvement for 1-2 years after surgery.

What kind of Outcome can I expect after Rotator Cuff Surgery?

Most patients can expect that rotator cuff surgery will significantly reduce the pain in their shoulder. Some ongoing pain is common and can be frustrating. Most people can return to many of the activities they were doing before they injured their shoulder but it is common to have some pain with overhead activities or activities
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that require a lot of use of the arms. This is usually quite tolerable. Some patients can have a lot of shoulder stiffness or a 'frozen shoulder' after surgery. This stiffness can be very painful and frustrating but usually gets better with time, but may take 6-12 months.

If there was a lot of weakness in the arm before surgery, this usually does not get better. Strengthening exercises can help this.

Information About What to Do After Surgery:

Going Home:
• Arrange to have someone take you home after surgery, even if you are taking a taxi

Showering and Care of your Incision and Wound:
• If there is a bulky outer dressing, you can remove this at 2 days post op, but leave the inner dressing on and dry for 5 days post op by avoiding direct water running over it. The inner dressing may have dried blood on it which is normal.
• At five days post op, the inner dressing can be removed for showering, if desired. If there are steri strips in place – small pieces of tape that are right on top of the wound – these are left on until they fall off on their own or until you see your surgeon.
• With the dressing off, and only the steri strips or staples in place, you can shower, but do NOT scrub or spray the wound directly. Water will only splash on the wound or lightly run down it, along with any soap or shampoo from you but not directly applied, as you take your shower.
• When you get out of the shower, very lightly pat the wound dry with a clean towel or piece of paper towel and let it air dry well.

• Then cover the incision (steri strips or staples) with a Mepore dressing that can be purchased at a Pharmacy. This Mepore is removed prior to any shower you have and a new Mepore is put on afterwards.
• DO NOT attempt to clean the wound more than this and DO NOT put anything on it – this includes any kind of antibiotic ointment or special cleaning solutions or scar creams – these are NOT to be applied.

How to change your dressings if they accidentally become soiled or wet, apart from as discussed above:
• Wash your hands with soap & water before you take care of your wound
• Remove all wet dressing layers that are currently in place and discard. Let the site air dry well if damp.
• Do not remove the steri strips- small tapes that are right on top of the wound. They will fall off themselves. Do not attempt to further clean the wound.
• Cover wounds with a new Mepore dressing as discussed above.

Important points to Review:
• Blood on the dressings you remove is normal.
• Steri strips, if in place, are not removed. They generally fall off on their own.
• A wet dressing CANNOT be left on the wound and must be changed as above.
• DO NOT apply any ointments or creams, of any kind, to the wound.
Activity:
• Wear your sling whenever you are up for the first 6-8 weeks after surgery.
• Remove the sling at least 3 times per day and stretch the elbow; make sure to fully the straighten or 'extend' the elbow to make sure it does not get stiff.
• Do pendular exercises 3 times per day. Instructions on pendular exercises are at the end of this handout.
• Gradually resume normal activities like walking; recovery is gradual and it is normal to feel weak and tired for a couple of weeks after surgery.
• You can begin physiotherapy within a week or two.
• Your surgeon will give you a prescription for physiotherapy.

Tips for Living with a Sling:
• Many normally simple activities, like dressing, putting on shoes etc. can be more difficult with a sling on.
• This guide offers many tips on how to prepare for your time in a sling.
• Please review it prior to surgery and after.

Pain:
• Discomfort will be moderate and may be severe for the first few days and will gradually get better.
• In the first day or two after the surgery, it is better to give the pain medication regularly e.g. every 4-6 hours, rather than wait until the pain is bad.
• Use pain medications as prescribed by your surgeon.
• Gradually reduce your pain medications as your pain decreases.

Swelling:
• Expect swelling for a few weeks following the surgery. This is due to fluid that was introduced into the joint during surgery and inflammation.
• Some swelling or bruising may go into the front of the chest muscles or down the arm to the hand.
• When resting, sit with the affected limb supported with pillows.

Icing:
• Apply ice packs or use a Cryo Therapy ‘Ice Machine’ to reduce pain and swelling.
• Apply ice for 10-15 minutes, 4-6 times per day.
• Never apply ice directly to skin.

Return to Work:
• When you are able to return to work depends on:
  o the kind of job you have and its physical demands
  o how much pain & swelling you have after surgery
  o how your physiotherapy is progressing
  o if you are able to modify your job or work from home
• Your surgeon will help you decide when to return to work.
• Expect to take off at least 1-2 weeks for a desk job that you are able to do with your arm in a sling.
• Expect to take off 3-4 months for work where you need to use both arms.
• Expect to take off around 6 months for more physically demanding work.
**Healthy Eating:**
- Start with clear fluids after surgery
- Gradually increase to a well balanced diet as your appetite allows
- Drink at least 6 cups of fluids daily

**Smoking:**
- Smoking causes problems with the healing of bones and tissues
- Not smoking or smoking less for 2 months before surgery and for 3-6 months after surgery will reduce the chance of a problem with healing
- Visit [www.quitnow.ca](http://www.quitnow.ca) for information about tools and medications to help you quit smoking

**Going to the Bathroom:**
- Changes in medications, activity and diet can cause constipation (hard, dry bowel movements)
- To avoid constipation: drink lots of fluids, eat high fibre foods such as prunes, fruits, bran, whole grains and vegetables
- Take a stool softener or laxative if needed. Ask your surgeon or pharmacist to suggest one.

**Driving:**
- Do not drive while taking pain medications or if your arm is in a sling
- Discuss with your surgeon when it is safe to drive
- If your ability to safely drive (e.g. swerve sharply, perform an emergency stop) is impaired, your insurance may not be valid in the case of an accident

**Supplies/special equipment:**
- A sling will be put on in the operating room.
- **Alternative Shoulder Sling:** If you find the sling supplied by the hospital quite irritating or uncomfortable, you may wish to buy a more padded sling which some patients find more comfortable. This is entirely optional. These can be bought at One Bracing @ RebalanceMD or other medical supply stores such as McGill & Orme, Island Orthotics and others.
- Your surgeon may have prescribed you a special sling prior to your surgery. If so, please bring it to your surgery.
- If you purchase a sling, make sure that you have it fitted BEFORE your surgery so that it is properly adjusted. This should be done where you purchase your sling.
- **Cryotherapy "ice machines":** are an alternative to ice packs. They can be extremely helpful to reduce pain and swelling. These can be bought at One Bracing @ RebalanceMD or other medical supply stores such as McGill & Orme, Island Orthotics and others.

**Your Medications:**
- Resume your regular medications unless instructed otherwise by your surgeon

**Follow Up Appointment:**
- A post-operative appointment should be scheduled for approximately 10-14 days post surgery
- Call the office if you do not have an appointment scheduled
- Write down your questions for the surgeon before the appointment

**Call your Surgeon if you have:**
- Increasing pain or swelling that is not relieved by elevation, ice and pain medications
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- Incisions that are red, puffy, hot or leaking fluid more than 48 hrs after surgery
- Fever greater than 38°C
- Signs of circulation problems (e.g. coolness, change in skin colour, numbness) which is not relieved by rest
- Persistent nausea and vomiting
- Inability to pass urine for more than 8-10 hours

If you cannot reach your Surgeon:
- Call your family doctor, go to a walk-in clinic or hospital emergency department

Non-emergency health information and services:
- HealthLinkBC  www.healthlinkBC.ca
- Tel: 811 from anywhere in BC
- Tel: 711 for deaf and hearing impaired assistance (TTY)

Physiotherapy Exercises for Shoulder Surgery Patients

You may begin these exercises immediately after surgery unless told otherwise by your surgeon. Do the exercises 2-3 times per day for around 10 repetitions each.

Your surgeon will give you a prescription to see a physiotherapist and tell you when to see a physiotherapist.

Elbow Movement Exercises:

1. Elbow Flexion-Extension: sitting up or lying down, take your sling off and keep your arm by your side. Straighten your elbow as far as possible. You can use your non-operated arm to help guide. If you have had a biceps tendon repair, do not do this exercise until approved by your surgeon.

Elbow Movement Exercises:
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2. Wrist Flexion-Extension:
   Keeping your arm at your side, bend your wrist forwards and backwards as far as possible. You may need to help with your non-operated hand.

3. Grip: Make a fast or squeeze a rolled up cloth or tennis ball

4. Palm Up/Palm Down:
   Keeping your arm at your side, start in a hand shake position. Slowly rotate your palm down as fully as possible and up as fully as possible until you feel a stretch in your forearm. If you have had a biceps repair, do not do this exercise until approved by your surgeon.

Shoulder Pendular Swing Exercises

Spend about 15 minutes, 3 times a day exercising your shoulder.

- Rest your good arm on the edge of the table
- Bend over from your waist
- Allow your affected arm to hang down – it should hang limp and loose

- Swing the arm back and forth in a smooth pendular motion about 10 times
- Then allow the arm to circle gently in a clockwise direction with circles that grow gradually larger. Repeat 10 times.
- Now go counter clockwise. Repeat 10 times.

The information in this handout is intended only for the person it was given to by the health care team. It does not replace the advice or direction given to you by your surgeon.