

Arthritis

Injuries or infections may lead to arthritis. Arthritis is a roughening of the joint caused by worn cartilage and loose fragments of bone and cartilage (loose bodies).



TREATMENT

Clear a space

Surgery can help clear a space within your shoulder joint. Trimming acromion bone and removing ligaments may also help open up space.



Rotator Cuff Repair

Open cuff repair is done in large, chronic and retracted tears. Arthroscopic cuff repair is possible in small tears. Healing and rehabilitation may take longer duration.



Stabilize the joint

To tighten and stabilize the joint, your doctor reattaches the capsule and labrum to the front of the glenoid. This is often with arthroscopy. Sometimes open surgery is needed to reattach tissue more securely.



"Clean up" the joint

Your doctor can clean up an arthritic shoulder joint. He or she smoothens the rough surfaces and removes loose bodies. Scraping or shaving the bone may promote new cartilage growth.



Note:

It is necessary to report immediately if you experience any of the following after surgery.

- Fever
- Swelling of the joint
- Painful movement

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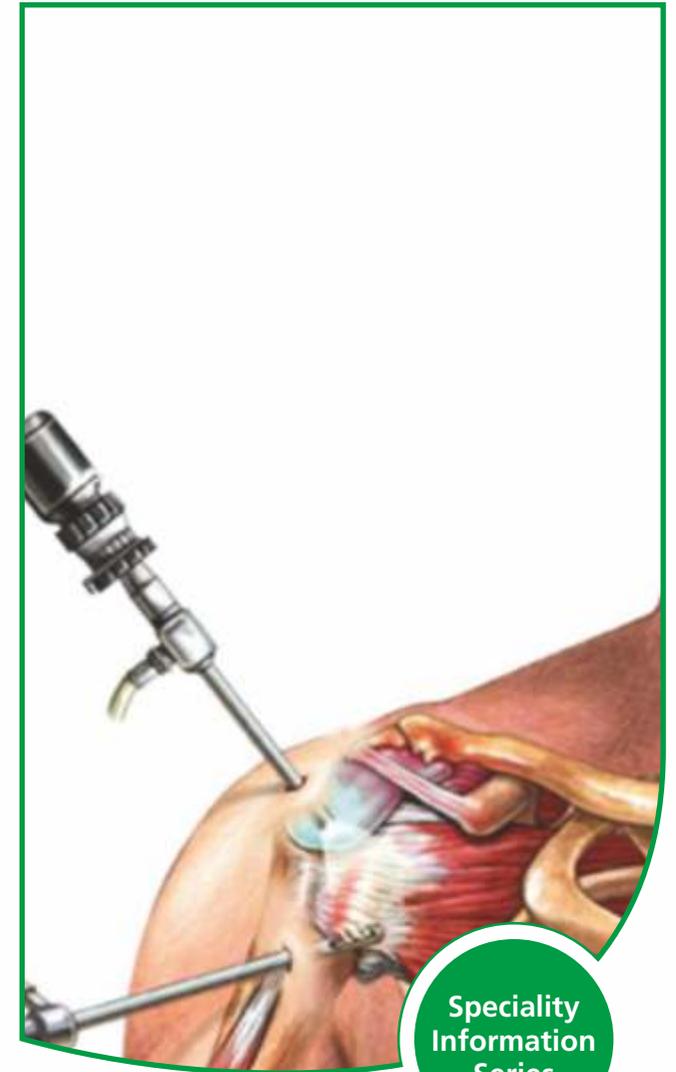
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Issued in public interest

Shoulder Arthroscopy



Speciality
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“What is Shoulder Arthroscopy?”

Shoulder arthroscopy is a type of surgery that uses a small camera (arthroscope) inserted through a small incision to examine or repair the tissues inside or around your shoulder joint.

Description

The surgeon makes a small incision, about one-quarter inch (0.25") long, near the shoulder joint. A small camera (arthroscope) is then inserted into the joint. The camera is attached to a video monitor to allow the surgeon to see inside the joint.

Unlike knee arthroscopy, most people are asleep during the surgery. Therefore, you will be unable to watch the video monitor. A nerve block may be used to numb your shoulder and arm to help reduce pain after surgery. A salt solution (saline) is pumped into the shoulder to expand the joint. This helps the surgeon see the joint and helps control any bleeding.

The surgeon will look around the entire joint to check the cartilage, tendons, and ligaments of the shoulder. If damaged tissues need to be repaired, the surgeon will make 1 to 3 additional small incisions to insert other instruments. These may include a blunt hook to pull on tissues, a shaver to remove damaged or unwanted tissues, and a burr to remove bone.

In addition to working on the shoulder joint, the surgeon often places the camera in the space above the rotator cuff tendons (the subacromial space). The surgeon can evaluate the area above the rotator cuff, clean out inflamed or damaged tissue, remove a bone spur, and fix a rotator cuff tear.

At the end of the surgery, the fluid is drained from the shoulder, the small incisions are closed, and a dressing is applied. Your surgeon will probably take pictures of the procedure from the video monitor to show you what was found and what was done.

Why the Procedure is performed ?

Arthroscopy may be recommended for shoulder problems, such as:

- A torn or damaged cartilage ring (labrum) or

ligaments (in cases of shoulder instability)

- A torn or damaged biceps tendon
- A torn rotator cuff
- A bone spur or inflammation around the rotator cuff
- Stiffness of the shoulder
- Inflammation or damaged lining of the joint
- Arthritis of the end of the clavicle (acromioclavicular joint)

Risks

The risks for any anesthesia are:

- Allergic reactions to medications
- Problems breathing

The risks for any surgery are:

- Bleeding
- Infection
- Nerve damage

Additional risks include:

- Stiffness of the shoulder
- Failure of the surgery to relieve symptoms
- Failure of the repair to heal



Outlook

Arthroscopy is an alternative to "open" surgery that completely exposes the shoulder joint. Arthroscopy results in less pain and stiffness, fewer complications, shorter (if any) hospital stays, and possibly faster recovery time. The expectations vary depending on the purpose of the surgery. In cases where repair is needed, the body still has to heal after arthroscopic surgery, just as if the surgery were open. Therefore, the overall recovery time may still be long.

Surgery to fix a cartilage tear is usually performed because the shoulder is not stable. Many people recover fully, and the symptoms of instability go away. However, some people can still have instability of the shoulder after arthroscopic repair.

Using arthroscopy for rotator cuff repairs or tendonitis usually relieves the pain, but you may or may not regain all of your strength.

Recovery

Recovery can take anywhere from 1 to 6 months, depending on the surgery that was performed. You will probably have to wear a sling for the first week. If you had

What are the advantages?

Advantages of arthroscopy over open surgery are:

- Patient recovery and rehabilitation is faster
- Small incisions
- Minimal postoperative pain
- Less complications
- Stay is short
- Early return to work and cost effective
- Feeling fine once again

It is comforting to know that there is help for your shoulder and knee problem. Your doctor's arthroscopic skills and your rehabilitation efforts can help you get back in action. Recovery from arthroscopy is less painful than recovery from open surgery. That means you may be able to return sooner to all the things you enjoy most.

What are the possible complications ?

These can occur in less than 1% of the procedures. Uncommon complications do occur occasionally, during or following arthroscopy such as infection, phlebitis (blood clots of vein), excessive swelling or injury to nerve.

PROBLEM

Impingement

Repeated overhead movements can squeeze (impinge) and inflame your rotator cuff and bursa. The arthroscopic view may reveal swollen or torn soft tissue or overgrown bone



Rotator Cuff Tear

Repeated shoulder activity causes microtrauma within the rotator cuff. This can lead to irritation, bruising or fraying of the cuff (Tendonitis). Severe tendonitis or macrotrauma can cause partial or complete tear of rotator cuff causing pain, weakness and loss of normal movement.

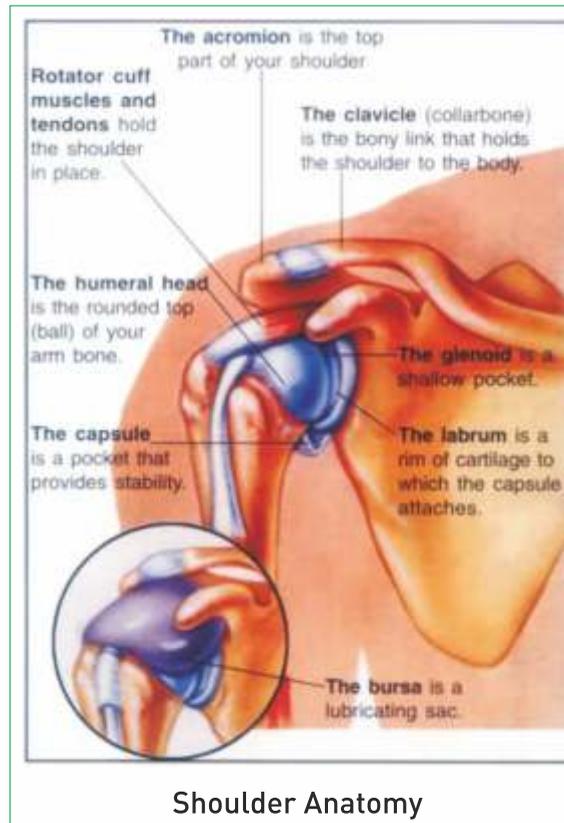


Instability

When a shoulder is forced beyond its range of motion, the ball can pop out of its socket. The capsule and labrum pull away from the socket (which may also fracture), causing instability.



- Labral lesions
- Shoulder stabilization for dislocation



Recovery after Arthroscopy

Postoperatively, the small incisions are covered with a small dressing. Postoperative pain and recovery depend on the problems for which arthroscopy is performed and type of surgery involved. Many arthroscopic procedures can be performed as "day cases", with patient being discharged the next day. Arthroscopy is only the first step to getting your joint back to normal. You have a key role in the next step: Rehabilitation. Longer rehabilitation will be required following some procedures (e.g. cruciate ligament reconstruction and shoulder surgeries).

Remember, that people who have arthroscopy can have many different diseases and preexisting conditions, so each patient's arthroscopic surgery is unique to that person. Good outcome depends not only on surgery, but also on patient compliance in post operative rehabilitation and pre-existing conditions

a more extensive repair, you may have to wear the sling for a longer period. You may take medications to control your pain.

When you can return to work or play sports will depend on the surgery that was performed, but it can range from 1 week to several months. For many procedures, especially if a repair is performed, physical therapy may help you regain the motion and strength of your shoulder. The length of therapy will depend on the repair that was done.



What conditions can be treated with arthroscopic shoulder surgery?

Rotator Cuff Tears

Treatment of rotator cuff tears with shoulder arthroscopy is controversial. Some orthopedic surgeons treat all rotator cuff tears arthroscopically, some choose particular tears, and others treat them all open. There is no consensus which one is better. For more information about the controversy, you can read the following article: [Arthroscopic treatment of rotator cuff tears](#)

Shoulder Instability - Labral Tears - Slap Lesions

Labral tears, such as Bankart lesions and SLAP tears, are commonly treated with arthroscopy. It is very important that patients who have arthroscopic surgery for these procedures follow their post-operative rehab protocol very closely. Patients are often tempted to do too much too soon!

Impingement Syndrome

Patients with impingement syndrome that is not cured with conservative treatments may consider a procedure called an arthroscopic subacromial decompression. This procedure removes the inflamed bursa and some bone from the irritated area around the rotator cuff tendons. By removing this tissue, more space is created for the tendons and the inflammation often subsides.

Biceps Tendonitis

The biceps tendon can become irritated and inflamed as an isolated problem or in association with problems such as impingement syndrome and rotator cuff tears. When the biceps tendon is damaged and causing pain, a procedure called a biceps tenodesis can be performed. This procedure usually causes no functional difference, but often relieves symptoms.

Frozen Shoulder

Frozen shoulder seldom requires operative treatment, and treatment for many months or years is often necessary before considering operative treatment. When frozen shoulder must be treated surgically, it is of utmost importance to begin aggressive physical therapy immediately following surgery. Without this, it is likely the problem will return.

AC Joint Arthritis

The AC joint, or acromioclavicular joint, is occasionally affected by arthritis. When arthritis of the AC joint is severe, the end of the clavicle (collarbone) can be removed. By removing the damaged joint, the symptoms of AC arthritis are often relieved.

What is the recovery from shoulder arthroscopy?

The recovery depends on what type of surgery is performed. One of the problems with shoulder arthroscopy is that the procedure hurts much less than open shoulder surgery, and therefore patients may tend to do too much, too soon. It is very important that you only perform activities that your surgeon recommends following a shoulder arthroscopy. Even though your shoulder may feel fine, you need to allow time for repaired tissues to adequately heal. This is especially important for patients who have rotator cuff repairs and labral repairs.

What is ARTHROSCOPY ?

The word arthroscopy comes from two Greek words, "arthro" (joint) and "skopein" (to look). The term literally means "to look within the joint". A small incision is made in the patient's skin and the arthroscopy, an instrument, like a small telescope, is inserted into the joint. Light is transmitted through fibre optic cable to the end of the arthroscopy, and the instrument is attached to a video monitor.

Arthroscopy allows direct visualization of the cartilage, ligaments and the menisci. Surgical procedures can be carried out via small incisions around the joint. Arthroscopy is most commonly performed on the knee and shoulder joints, and is also used for ankles, elbows, hips and wrist joints.

Why is Arthroscopy necessary ?

Diagnosis of the joint injuries and diseases begins with a thorough medical history, physical examination and usually by X-rays. Additional tests such as a MRI or CT scan also may be needed. Joint structures which are not visible in X-rays are seen in MRI. Through the arthroscopy, a final diagnosis is made which is more accurate than through open surgery or from X-ray studies.

Diagnostic Tests

Any of the tests below may be used before arthroscopy. These tests help pinpoint your injury and suggest treatment. They may also help your doctor to know where to focus the arthroscopy.



How is Arthroscopic surgery performed ?

Arthroscopic surgery may be performed under general, spinal or local anaesthesia, depending on the joint or suspected problem. A small incision (about 1cm long) is made to insert the arthroscopy. Several other incisions may be made to see other parts of the joint or to insert other instruments. When indicated, corrective surgery is performed with specially designed instruments which are inserted into the joint through other incisions. Occasionally, during arthroscopy, the surgeon may discover that the injury or disease cannot be treated adequately with arthroscopy alone. The extensive open surgery may be performed while patient is anaesthetized or at a later date after discussing the findings with the patient.



Shoulder Joint

Shoulder

Some of the procedures that may be performed arthroscopically include:

- Subacromion decompression for rotator cuff tear & impingement syndrome
- Rotator cuff repair
- Frozen shoulder (Stiff Shoulder)
- Acromioclavicular joint problems