

ROTATOR CUFF INJURY

The most common shoulder complaint is a rotator cuff tear (Figure 1). The rotator cuff is the main group of muscles that surrounds the humeral head and helps seat it in the socket. The most common tendon to tear is supraspinatus – it usually pulls off the bone (Figure 2 and 3).

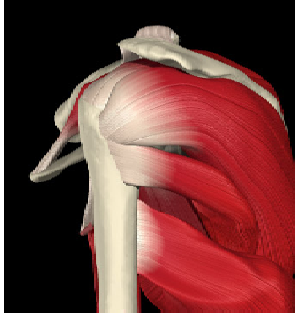


Figure 1. The rotator cuff

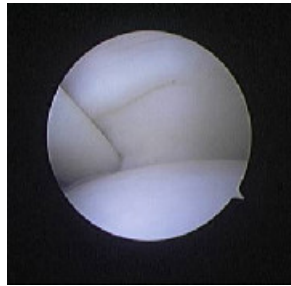


Figure 2. Arthroscopic picture of a normal supraspinatus tendon



Figure 3. Torn supraspinatus

Symptoms of a rotator cuff tear are pain and weakness with overhead activities and pain at night.

The condition is related to age, with the chances of the tendon tearing increasing with age. The tear can occur during an acute injury, such as a fall, or it may occur on its own from years of shoulder use.

If the tear is full thickness it will not heal by itself. The technology has advanced a lot recently and rotator cuff tears can often be repaired using ‘keyhole’ or arthroscopic surgery by an orthopaedic shoulder specialist as a day case (Figure 4, 5 and 6). Tears do get bigger with time – so the repair is better done earlier rather than later.



Fig. 4 Arthroscope

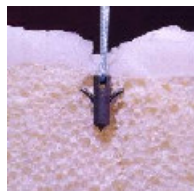


Fig. 5 Fixation anchor



Fig. 6 Tendon repair

Rehabilitation initially is an ultrasling for 6 weeks with a graduated 3 month exercise program of mobilization and muscle strengthening (Figure 7 and 8).



Fig. 7 Ultrasling

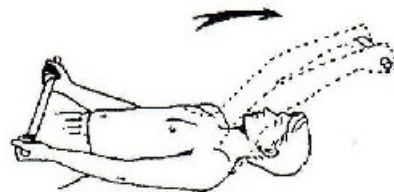


Fig. 8