The Orthopaedic Group

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Frequently asked questions:
Arthroscopic and Open Shoulder Surgery

Will it be painful?

Shoulder surgery can be quite painful. Even though arthroscopic shoulder surgery you will only have small scars, this procedure can be painful due to the surgery performed inside your shoulder. Open shoulder surgery such as reverse shoulder replacements or Latarjet procedure can also be quite sore. The following pain control methods may be used to ensure you have as little discomfort as possible:

- A local nerve block, known as an interscalene block
- Pain killers and anti-inflammatory medications, taken regularly on discharge from the hospital

Interscalene block

You will generally have a nerve block for the surgery, known as an interscalene block. The Anaesthetist will discuss this in details with you before the surgery.

An interscalene block is a nerve block in the neck used to provide a heavy numbness in the shoulder and arm (in a same way that a dentist can numb a tooth) so that the shoulder surgery can be carried with excellent pain relief.

The benefits of an interscalene block are:

- Reduced risk of nausea and vomiting and sedation
- Earlier to leave hospital
- Early intake of food and drink
- Excellent pain control
- Lighter general anaesthetic with speedier recovery from the anaesthetic

Painkillers

You will be given painkillers (either as tablets or injections) to help reduce the discomfort whilst you are in hospital. A one week prescription for continued pain medication will be given to you for your discharge home. Keep the pain under control by using medication regularly at first. It is important to keep the pain to a minimum, as this will enable you to move the shoulder joint and begin the exercises you will be given by the Physiotherapist. If you require further medication after these are finished, please contact the rooms or visit your General Practitioner (GP).

Regular application of ice packs can help ease some of the aching. Massage of the surgical site is generally discouraged, especially in the early stages of recovery.

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Will I need to wear a sling?

Your arm will be immobilised in a sling for a number of weeks. This protects the repair during the early phases of healing and makes your arm more comfortable. A Nurse or Physiotherapist will show you how to take the sling on and off safely. You will be told post operatively how long you will need to wear the sling for. The sling will then gradually be used less as the repair heals and the muscles regain their strength. If you are lying on your back to sleep, a pillow under your upper arm/elbow can make it more comfortable. You may find placing a thin pillow or rolled towel under your elbow helpful.

Do I need to do exercises?

Yes. At first, you will only be moving the joint for specific exercises that the Physiotherapist will show you. You will be referred for continued physiotherapy as an outpatient.

You will need to get into the habit of doing regular daily exercises at home for several months. You will also need to commit to attending physiotherapy regularly from 2 weeks post operation. This will enable you to gain maximum benefit from your operation.

What about hydrotherapy and physiotherapy?

No hydrotherapy or swimming/immersing yourself in water for at least 3 weeks to allow the wound to heal. Generally you shoulder book to see your physiotherapist around the 2-3 week mark past surgery.

What do I do about the wound?

Your wound will have a shower-proof dressing on when you are discharged. You may shower or wash with the dressing in place, but do not run the shower directly over the operated shoulder or soak it in the bath. Pat the area dry, do not rub. You may have stitches/clips that will need to be removed/trimmed at the rooms post operatively. The nursing staff will advise you when this can happen; it is usually between 10 to 14 days after your operation. Avoid using spray deodorant, talcum powder or perfumes on or near the wound until it is fully healed.

Try to leave the dressing intact until your post operative appointment but if your dressing gets soaked or falls off it can be replaced with a water proof dressing from your chemist, your GP or in Mr Mattern's rooms. Please discuss any queries you may have with Mr Mattern.

Swelling and bruising in the hand, fingers and arm are very common, and usually settle with elevation and movement of the fingers, and elbow.

When do I return for followup?

This is usually arranged for approximately 2 to 3 weeks after you are discharged from hospital, to check on your progress. Please discuss any queries or worries you may have when you are at the clinic. Appointments are made after this as necessary.

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Are there things that I should avoid doing?

Although your shoulder has been repaired by surgery it takes time to heal and then strengthen. During this time it is important to achieve a balance between protecting the surgery and avoiding stiffness.

Avoid anything other than gentle everyday activities for the first 3 weeks, especially those taking your elbow away from your body. Keep it in the sling, except when you are doing your exercises. **You should aim to lift no more than a cup of tea or glass of water until instructed.**

There may be other movements that are restricted for you. You will be told if this is the case by the Physiotherapist.

Do not lie on your operated side whilst still wearing the sling. Do not let your elbow move or stretch across the front of your body. This can happen at night when you are lying on the side that has not been operated on. So once you stop using the sling; place your arm on pillows in front of you.

Within these general instructions be guided by pain. **It is normal for you to feel discomfort, aching and stretching sensations when you start to use your arm. Intense and lasting pain (e.g. for 30 minutes) means that you should reduce that particular activity or exercise. Avoid sudden, forceful movements involving weight.**

When can I drive?

You cannot drive while you are wearing the sling. After that, the law states that you should be in complete control of your car at all times. It is your responsibility to ensure this and to inform your insurance company about your surgery. **The usual time period is a minimum of 4-6 weeks, but it is dependent on the type of surgery performed.**

When should I contact the rooms?

A post-operative appointment will be made 2-3 weeks after your surgery to review your wound, discuss the surgery and plan the next phases in your rehabilitation.

After your operation, you should contact the rooms immediately if you get a temperature, become unwell, notice pus in your wound, or if your wound becomes red, sore or painful.

If anyone instructs you that the wound is infected, please contact the rooms before commencing on any antibiotics.

If there are any other concerns please feel free to contact the rooms for any questions.