Arthroscopic Shoulder Reconstruction for Anterior Instability

Arthroscopic reconstruction has become the most common surgical treatment of anterior shoulder instability. With the use of modern techniques, instruments and materials, the success rate of the operation is very high with a low complication rate. However, there is still a failure rate of 5 to 10%, i.e. up to 1 in 10 patients will have further episodes of subluxation or dislocation after surgery. Therefore, it is important that you protect your shoulder in the early stages following surgery and follow your rehabilitation programme.

Things You Should Know

- You will require a general anaesthetic +/- regional block.
- The operation normally takes between 30 to 60 minutes.
- You will typically have 2 or 3 small skin incisions.
- You can go home the day of surgery, occasionally stay overnight.
- The dressings are waterproof, so you can shower (out of the sling) resting your operated arm on your abdomen or by your side.
- Apply an ice-pack regularly to your operated shoulder in the first few days after surgery to reduce pain and swelling.
- Take regular pain relief in the first few days, then as required.
- You will need to wear a sling full-time for 4 weeks.
- During this time, you can come out of the sling to shower and dress.
- After 4 weeks – you can come out of the sling and you are allowed to perform usual gentle activities of daily living.
- You will commence physiotherapy at 4-6 weeks after surgery.
- Driving is allowed at 4-6 weeks, once out of your sling.

Appointments:
Dr Young - 2 weeks, 8 weeks & 6 months.

NOTIFY DR YOUNG OR YOUR GP IF THERE IS ANY UNUSUAL OR INCREASING SWELLING, REDNESS OR PAIN

Rehabilitation Guidelines

0-4 weeks: Sling full-time.
4-6 weeks: Commence formal physiotherapy (range of motion, scapular control, isometric/light Theraband strengthening).
6-8 weeks: Resume athletic conditioning (eg. jogging, cycling), your physiotherapist can start isometric cuff strengthening, scapular rehabilitation and light Therabands, but NO advanced strengthening exercises.
3 months: Advanced strengthening program of the upper limbs.
4 months: Progressive return to ‘controlled’ activities, including swimming, golf swings, and throwing programs.
6 months: Progressive return to full sporting activities. Discuss with your therapist or team physician regarding use of a protective brace.

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