

## **Arthroscopic Labral Repair**

### **What is the labrum?**

The labrum is a rim of soft tissue around the edge of your glenoid (socket) of your shoulder. This rim deepens your socket so that your humeral head (ball) of your shoulder is more stable. The labrum is an important structure to give your shoulder stability – meaning prevent a shoulder dislocation. When you tear your labrum, this may cause pain and shoulder instability.

### **How do you get labral tears? And when do you recommend surgery?**

Labral tears can be the result of an acute large injury, repetitive smaller injuries, or degenerative – meaning from regular wear-and-tear from life. Some form of degenerative labral tearing is part of the body's normal aging process – meaning most people develop a labral tear later in life. These types of labral tears rarely need surgery.

Labral tears can also occur from acute injuries – such as shoulder dislocations – or they can develop over time from repetitive smaller injuries – such as those during years of playing sports. Surgery may be beneficial to repair your torn labrum to decrease the risk of future shoulder dislocations or if you have pain that has not responded to conservative treatment, like therapy or anti-inflammatory medications.

There are three main categories of labral tears:

- SLAP tears: this refers to a tear of the superior (top) part of your labrum where your bicep tendon inserts in your shoulder
- Anterior or Bankart tears: this is a tear of the front of your labrum – common in patients who have dislocated their shoulders
- Posterior tears: this is a tear from the back of your labrum – more common in patients who play certain sports

### **How do you repair the labrum?**

The labrum is repaired arthroscopically. This means a small camera is inserted into your shoulder and all of the repair is done using multiple, small incisions (~1 cm each). Special anchors attached to sutures are inserted around your glenoid and the sutures are used to fix the labrum back down to the glenoid bone in its correct position. Then it is up to your body to heal this labrum back to the glenoid.

### **How long does it take to recover from this surgery?**

All patients recover at their own pace, and many factors affect recovery speed. In general, it takes roughly 3 months for the labrum to fully heal back down to bone, so we need to protect your shoulder repair during this time. Much of the recovery occurs during the first 6 months.

### **When can I return to sports?**

Most patients return to sports around 6 months after surgery. Depending on your sport and position, this may be earlier or later. Some general return to sports criteria are as follows:

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- Full, painless range of motion without apprehension (the feeling that your shoulder might dislocate)
  - Similar shoulder strength to the other (non-surgical) arm
  - Completed a progressive return to sport protocol

## **Surgery Information**

### **Length of Stay**

This is a same-day procedure – meaning once the surgery is done and you have recovered in our recovery unit (PACU) then you will go home. You will need someone available to stay in the facility during the day of your surgery and drive you home afterwards.

### **Anesthesia**

You will typically receive two types of anesthesia for this surgery.

- General anesthesia: meaning you are asleep during the procedure
- Nerve Block: the anesthesiologist will place medicine around the nerves that go to your arm. This will cause the arm to feel numb and not move. This block is very helpful for pain control after surgery and will last for about 12-24 hours.

### **Incisions and Dressings**

You will have multiple small incisions around your shoulder closed with nylon suture (black suture) which will be removed as your first visit 2 weeks after surgery.

Your shoulder will be covered with a combination of gauze and tape. After three days you may remove this tape and gauze. At this point you can shower, letting soap and water run over the wound, patting them dry afterwards. You do not need to place a new dressing over top of the stitches, unless you would like to. Sometimes the stitches may snag on shirts, so you may find it more comfortable to place band-aids over the stitches to prevent this.

When showering, do not scrub the incision or dressings, just allow soap and water to run over the dressing/incision. Please do not submerge your incision under water for 4 weeks after surgery – no swimming pools, hot tubs, or baths. Do not apply any oils, ointments, or lotions to your incision or around your incisions.

### **Sling**

When you wake up from surgery, a sling will be on your arm. This sling is very important to protect the repair on your shoulder. You will be in a sling for 2 weeks full time and then another 4 weeks only when sleeping and out in public. You may remove the sling during the first 2 weeks for the following circumstances:

- Showering or changing clothes
- If you are relaxing on the couch – supported with pillows underneath the elbow
- When you are performing your home exercises or exercises with physical therapy

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***Is my sling in the correct position?***

This is a very common question. The simple answer is if you can look down and see your elbow then your sling is in an appropriate position – whether that means your arm is at your side or arm is across your stomach. The sling is in a bad position if your elbow is behind your back and you cannot see your elbow. Otherwise, the sling is mainly for comfort so you may adjust the position as needed for comfort.

**Pain Control**

The first week or two is typically the worst. The swelling in your shoulder and hand is completely normal and will go away within the first week. Here are some helpful tips for pain control:

- Review my “Post-operative medication” information sheet I provided or on my website. I prescribe many different medications after surgery to help control your pain in different ways.
- Sleep: wear your sling and place a pillow behind your elbow while you sleep. Please sleep on your back. Many patients find sleeping in a reclined position is the most comfortable position – a recliner or propping your back up with pillows may be very helpful.
- Ice: I strongly recommend ice after surgery. This will help with the pain and swelling after surgery. Apply for 20 minutes on and then 20 minutes off, repeat as needed. Ice-packs work just as well as an ice machine – and are significantly cheaper; however, many patients find the ice machine to be less hassle. Amazon and some medical supply stores supply these ice machines.

**Post-operative Appointment**

I will see you at roughly the following intervals after surgery: 2 weeks, 6 weeks, 3 months, and 6 months – or until you return to your sport

After your surgery, if you do not have a first post-operative visit appointment please call our office so we can schedule to see 2 weeks after surgery.

**For any concerns, please contact my office**

Please call my office if you begin to experience any of the following after surgery:

- Fever above 101.5 F
- Loss of motion or new onset numbness after surgery (your nerve block will be in place for approximately 24 hours after surgery)
- Excessive bleeding that is saturating the bandages
- Increased pain, increased redness around the incision, purulent drainage (thick, white drainage with a foul odor), or persistent drainage > 4 days.

**Post-operative Rehab and Restrictions**

**Physical Therapy or Home Therapy**

Your main goal after surgery is allowing the soft tissues to recover from the procedure by staying in the sling. During the first two weeks after surgery, please do the exercises listed in the document "Phase I – home exercise program". This consists mainly of shoulder pendulum swings, ball squeezes, hand/wrist/elbow motion. You may come out of your sling when you are doing these exercises.

At your 2 week surgery visit, I will give you a physical therapy prescription or a home exercise routine if you would prefer to do your exercises at home without a therapist.

### **Restrictions after surgery**

The following are activities I do NOT want you to do during your recovery:

- Sling:
  - Full-time 2 weeks and then 4 more weeks only when sleeping or in public
- Motion restrictions:
  - Avoid the throwing position (abduction + external rotation) for 12 weeks
  - Avoid sleeper stretches and behind the back (internal rotation) stretches for 12 weeks
  - Do not push yourself out of a chair or bed with your operative arm until 12 weeks after surgery
- Strengthening and weightlifting:
  - No strengthening operative arm until 12 weeks after surgery
  - Weightlifting restrictions: avoid bench press, Olympic lifts, and overhead press until 6 months post-op

### **Helpful resources during your recovery**



#### **Post-op Button or Magnetic shirts**

You can find these shirts on amazon by searching "Post-op shoulder surgery shirts". They have magnetic or button options that make it very easy to change your shirt without taking your sling off. They are typically ~\$15 per shirt.



### **Ice Machine**

While ice packs are cheap and just as effective, many patients like to use ice machines after shoulder surgery as they are less hassle. These machines can be found in medical supply stores but Amazon will sell these for much cheaper (~\$100). Search “ice machine for shoulder surgery” to find multiple options.



### **Door Pulley**

A door pulley is a very helpful way to work on range of motion exercises for your shoulder. Using the non-operative arm you can raise your operative arm without any effort (passive) or with some effort from your operative arm (active-assist). You can find these on Amazon by searching "Door Pulley for Shoulder Therapy".



### **Resistance Bands**

Resistance bands are used in many of my home exercise routines for patients after around 3 months from surgery. You can find these on Amazon by searching "Theraband resistance bands". Keep the band resistance under ~5 pounds.