

Rugby St Cross: Orthopaedic Physiotherapy

Sub-acromial Decompression (SAD)



This advice sheet is for patients following sub-acromial decompression surgery.

The rotator cuff and acromion may rub against one another, causing a painful condition known as impingement. Impingement may become a serious problem for some people and disturb their normal activities. The operation involves cutting the ligament and shaving away the bone spur. This allows the muscle to heal.

What to expect after surgery

Pain

A nerve block is used during the operation which means that immediately after the operation the shoulder and arm may feel numb. This may last a few hours. After this the shoulder may be sore. You will be given painkillers to help this whilst in hospital. These should be continued after you are discharged home.



Patient Information

Ice packs may also help reduce pain and any post-operative swelling. When at home wrap frozen peas or crushed ice in a dry cloth and place on your shoulder for up to 20 minutes. Use it at least 3 times per day, although there must be at least an hour between applications.

Sling

You will return from theatre wearing a sling. This is for comfort only and should be discarded as soon as possible (usually within the first one to two days).

Exercises

The success of your operation will often depend on the amount of effort you are prepared to put into your rehabilitation.

Although your shoulder may be sore after the operation it is vital that you start moving it in order to prevent your shoulder from becoming stiff. Before being discharged you will be seen by the physiotherapist who will advise and explain the exercises you need to carry out to ensure the best outcome of your surgery.

It is essential you do the recommended exercises three times per day or you may not make a full recovery.

You may experience discomfort when doing these exercises, this is normal. If, however, you feel a sharp pain, stop and try again later.

Neck exercises

Look up and down, look left and right, bend ear to shoulder on both sides.

Pendular hang

With the sling taken off, stand up, support yourself on the arm of a chair or a table and bend over slightly. Allow the operated arm to hang down under the effect of gravity and swing arm gently backwards



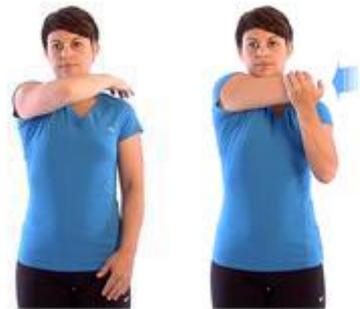
Patient Information

and forwards, then side to side. Slowly rotate arm in a circular motion progressively getting bigger. Repeat in other direction.

Posterior Capsule Stretch

Stand or sit and lift your operated arm across your chest and your hand over the opposite shoulder.

Use your unoperated arm to move your elbow towards your opposite shoulder, until you feel a stretch in the back of your shoulder. Maintain the position for 10 seconds and relax. Repeat 3 times.



External rotation

Stand holding a stick keeping your arms at your sides and elbows bent.

Use your unaffected arm to push your affected arm out away from your body, keeping your elbow by your side. Repeat 10 times.

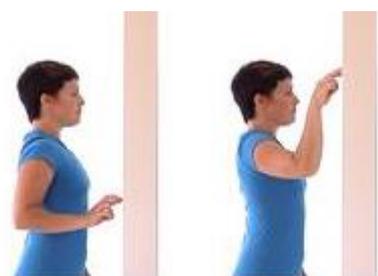


Wall Slides

Stand beside a wall and place your palm on the wall. Slide your hand up the wall slowly. Place your unoperated hand on top of your shoulder. Try not to let your shoulder hitch up into your hand. If it does, return your arm to the starting position and repeat 10 times.



Stand facing a wall and place your palm on the wall. Slide your hand up the wall slowly.



Patient Information

Place your unoperated hand on top of your shoulder. Try not to let your shoulder hitch up into your hand. If it does, return your arm to the starting position and repeat 10 times.

Active-Assisted Flexion

Lie on your back with your hands clasped together. Lift both arms over your head as far as possible helping yourself with the good arm. Return to the starting position and Repeat 10 times.



Hand behind Back

Stand or sit. Bring your operated arm behind your back and repeat 10 times.



Discharge

You will usually be able to go home when you feel ready. You will need to arrange for someone to drive you home. You should try to have a friend or relative stay with you for the first 24 hours.

Physiotherapy is essential after the operation and you will be contacted with an outpatient physiotherapy appointment between 10-14 days after your surgery. If you have not heard from outpatient physiotherapy within a week please contact the department.

Stitches (if you have them) will be removed between 10 and 14 days after surgery.

Patient Information

Please contact fracture clinic (through switchboard (024 7696 4000)) if the wound becomes:

- red or inflamed (swollen or hot to touch)
- begins to ooze or discharge
- your wound bleeds or the discharge smells
- your wound starts to smell

If you have any queries or concerns please contact:

Rugby Physiotherapy Orthopaedic Department Telephone: 01788 663054

University Hospital Coventry and Warwickshire Telephone: 024 7696 6013

The Trust has access to interpreting and translation services. If you need this information in another language or format please contact your physiotherapy department and we will do our best to meet your needs.

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