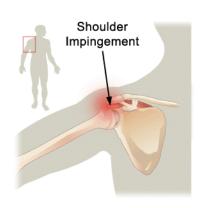


# Impingement

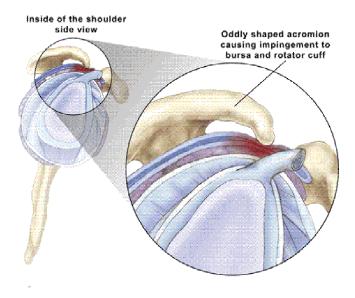
Normal shoulder function relies heavily on the correct function of four small muscles, termed the rotator cuff. These muscles are connected to the humeral head by tendons. These tendons are susceptible to wear and tear degeneration with age. In fact, the majority of sixty-year olds are thought to have tears in these tendons. However not all tears produce symptoms. Many patients do complain of a characteristic impingement pain when lifting their arm. This may be due to poor function of the rotator cuff leading to pinching of the tendons under the acromion, a bony arch that covers the rotator cuff tendons.





It may also be due to an abnormality of the acromion. Normally the acromion is flat. However, abnormal thickening or curvature (hook) of the acromion can rub and pinch the bursa. This in turn can lead to inflammation of the bursa and tendons.

#### Sub-acromial decompression



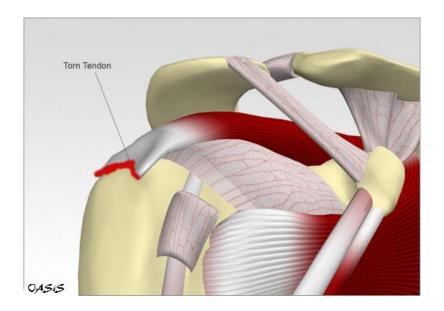
Impingement can be treated by steroid injections and physiotherapy. If rotator cuff function is improved then the space in which the tendons move is increased, reducing impingement. If a patient fails to improve, then surgery can be performed to remove part of the under surface of the acromion. This removes the part of bone on which the tendons are catching. This arthroscopic procedure is called Subacromial decompression.



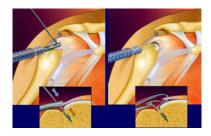


### Rotator Cuff Tear

The rotator cuff may tear suddenly following a fall or pull on the arm. This occurs most often in the middle-aged where wear-and-tear changes are already present. It can happen in younger patients with more severe injuries. Patients complain of pain and weakness, they find it difficult to lift their arm up to the side and often complain of a catching sensation when moving the arm. Some rotator cuff tears do not require surgery as the symptoms settle with injections and physiotherapy. However patients complaining of significant weakness should be considered for a repair of the tear.



This will depend on the size shape and quality of the tear. Rotator cuff repairs can be performed using arthroscopic surgical techniques.



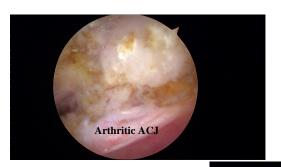
Sometimes the tear is so advanced that the bump of the humerus can be flattened to relieve pain. (Reverse Decompression)

It may be necessary to replace the shoulder in the elderly with a special type of joint replacement the Cuff Tear Arthroplasty replacement system.

## **ACJ** Arthritis

Overhead athletes or racquet sportsperson can wear out the AC joint also it is present in the 6<sup>th</sup> decade of life as part of general arthritis. Initially injection and physiotherapy can play a major role.







If a patient fails to improve, then surgery can be performed to remove a sliver of the joint surface. This arthroscopic procedure is called an ACJ resection.

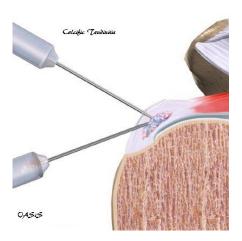
## Calcifying tendonitis

Occasionally local deposits of calcium salts can form in the rotator cuff. This can be painful when the calcifying material gives rise to inflammation. It can become extremely painful in an acute attack. Sometimes the calcium does not become inflamed, in this circumstance symptoms only occur if the deposit enlarges to the point that the tendon starts to catch on the overlying acromion. Calcium deposits are most frequently seen in females between 35 and 65 years of age.



Treatment is aimed at removing the material, which is often of toothpaste consistency, by aspiration through a needle, usually using ultrasound to find the

calcium. A steroid injection can also be helpful. If aspiration is unsuccessful then an arthroscopy can be performed and the calcium removed under direct vision. This procedure may involve a sub-acromial decompression to trim away some of the overlying bone.



If you are interested in making an appointment to discuss a treatment, please contact us, on telephone 01215807406

