

# Having sub acromial decompression surgery for shoulder pain

Department of Orthopaedics  
Information for Patients

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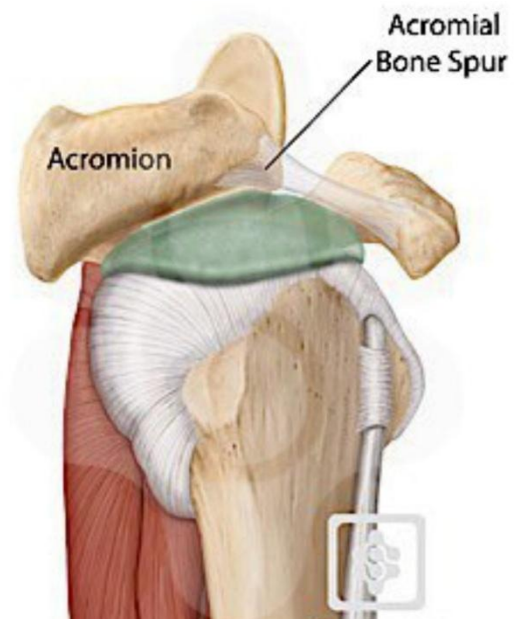
## Introduction

The shoulder is a ball and socket joint. It has a bony roof called the acromion. It is part of your shoulder blade.

The tendons of the rotator cuff muscles pass under this bony roof. The space is called the subacromial space.

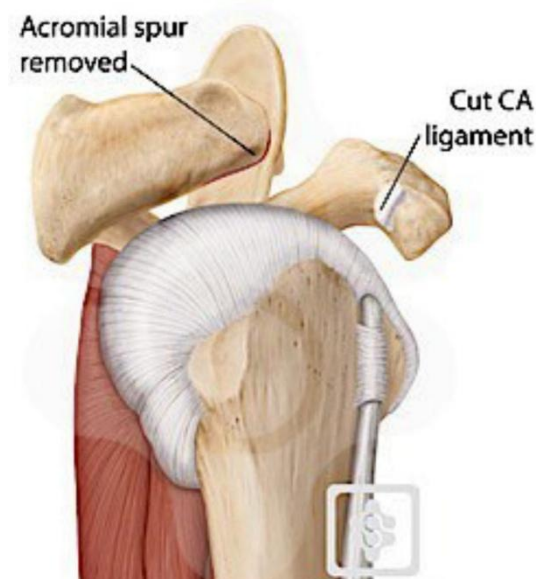
When the tendons are pinched between the ball and the acromion it is painful to raise your arm. This is often called impingement.

The bursa is a cushion that also lies in the space and this can become sore and inflamed.



## How can it be treated?

- You can have physiotherapy. You can sometimes have a cortisone injection. This can help the pain to let you do the physiotherapy exercises, and move the arm.
- If these treatments do not work, you may need surgery.
- Subacromial decompression involves releasing a ligament and removing part of the acromion (bony prominence). This creates more space in the joint. It stops the tendons being pinched as you raise your arm.
- The surgery is usually done by keyhole (arthroscopy).
- If you have wear and tear changes in the joint on top of your shoulder, where the collar bone meets the acromion (the acromioclavicular joint/ ACJ), the surgeon may remove the end of your collar bone as well. This is called excision of lateral clavicle / ELC.



## Risks

All operations have some risk. These include:

- Long-lasting pain and / or stiffness in / around the shoulder. 5 to 20% of people will have long lasting pain after the operation or develop a stiff painful shoulder (frozen shoulder)
- Infection. These are usually only superficial wound problems. Sometimes, deep infection may occur after the operation. This is serious but rarely happens (less than 1%)
- Damage to the nerves or blood vessels around the shoulder (less than 1%)
- Complications from the anaesthetic is low for most people. Your anaesthetist can discuss this with you

## Pain

- Your shoulder will be sore for the first few weeks after surgery.
- Take regular pain relief so that you can begin gentle exercises to regain your movement.
- Pain usually improves after 6 weeks.
- Full recovery and strength can take 6 to 9 months.
- Daily tasks like dressing, showering, and cooking may be hard at first, so you might need help for a few days.

## Sling

- You will be given a sling after the surgery, for comfort only.
- You should stop using it after the first day to help regain movement.



## After your surgery

### Wound care

If you had key hole surgery your wounds are very small. These may have stitches in or small sticky plaster strips.

Keep the wounds dry until healed and stitches are removed. These are usually removed at your GP surgery after about 10 days.

## **Exercise**

It is important to exercise your shoulder after your surgery.

Physiotherapists will see you on the ward. They will give you some basic exercises to start right away, to help regain your movement.

A Physiotherapist will then see you in the out patient Physiotherapy department, to progress the exercises.

There are no restrictions of movement after this surgery.

It might be painful for a while, but movement will become less painful with time and with doing exercises.

Avoid lifting heavy objects above head height in the early weeks after surgery, as it can make you sore.

Avoid working with the arm above head height for long periods in the early weeks after surgery, as this can also make you feel sore.

## **When will you get back to....**

Work (light duties) 4 to 6 weeks

Work (manual) 6 to 12 weeks

Swimming 6 weeks

Golf 6 weeks

Lifting 9 to 12 weeks

Gardening 6 weeks

Driving around 4 weeks normally, or when you are safe to control a car.

## **Who do I contact if I have any more questions?**

Please contact your consultants secretary for any further questions about surgery or any other concerns before your operation.

You can also ask the surgeon who is seeing you at the time of your pre-assessment appointment.

## Contact details

Waiting list office: 0116 258 4265

Pre assessment clinic: 0116 258 8109

Orthopaedic office: 0116 258 4782

Leicester Shoulder and Elbow Unit <https://leicestershoulderunit.co.uk/>

## Acknowledgements:

Thanks to shoulderdocus for use of images [www.shoulderdocus.co.uk](http://www.shoulderdocus.co.uk)

Health information and support is available at [www.nhs.uk](http://www.nhs.uk) or call 111 for non-emergency medical advice

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