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Rotator Cuff Tears: Frequently Asked Questions

What is the rotator cuff and what does it do?

The rotator cuff is a large tendon comprised of four muscles which combine to form a "cuff" over the upper end of the arm, the head of the humerus. The four muscles—supraspinatus, infraspinatus, subscapularis and teres minor—originate from the "wing bone," the scapula, and together form a single tendon unit that inserts on the greater tuberosity of the humerus.

The rotator cuff helps to lift and rotate the arm and to stabilize the ball of the shoulder within the joint.

What causes a rotator cuff tear and how would I know if I have one?

A rotator cuff tear may result from an acute injury such as a fall or may be caused by chronic wear and tear with degeneration of the tendon. Impingement of the front of the scapula, the acromion, on the tendon is believed to be a major cause of cuff tears in individuals older than 40 years.

Typically, you will feel pain in the front of your shoulder that radiates down the side of your arm. It may be present with overhead activities such as lifting or reaching. You may feel pain when you try to sleep on the affected side. You may note weakness of your arm and difficulty with routine activities such as combing your hair or reaching behind your back.

If the tear occurs with injury you may experience acute pain, a snapping sensation, and immediate weakness of the arm.

If I have a painful rotator cuff and keep using it, will this cause further damage?

A rotator cuff tear can extend or get larger over time. This can occur with repetitive use or a re-injury. It is common for patients with known rotator cuff disease to have acute pain and weakness following a minor injury. This likely represents extension of an existing tear.

If you know you have a rotator cuff tear, then worsening pain and decreasing strength may mean the tear is getting larger.

Can a rotator cuff tear be healed or strengthened without surgery?

Some rotator cuff tears such as partial thickness tears can be treated nonsurgically. Anti-inflammatory medication, steroid injections, and physical therapy may all be of benefit in treating



symptoms of a cuff tear. The goals of treatment are to relieve pain and restore strength to the involved shoulder.

Even though most tears cannot heal on their own, satisfactory function can often be achieved without surgery.

If, however, you are active and use your arm for overhead work or sports, then surgery is most often recommended because many tears will not heal without surgery.

At what point does a rotator cuff tear require surgery to fix it?

Surgery is recommended if you have persistent pain or weakness in your shoulder that does not improve with nonsurgical treatment. Frequently, patients who require surgery will report pain at night and difficulty using the arm for lifting and reaching. Many will report ongoing symptoms despite several months of medication and limited use of the arm.

Surgery is also indicated in active individuals who use the arm for overhead work or sports. Pitchers, swimmers, and tennis players are common examples.

What options are available for surgical repair?

The type of repair performed is based on the findings at surgery. A partial tear may require only a trimming or smoothing procedure called a débridement. A full-thickness tear within the substance of the tendon can be repaired side to side. If the tendon is torn from its insertion on the humerus, it is repaired directly to bone. This is commonly done in conjunction with other procedures to help with pain relief.

How important is rehabilitation in the treatment of a rotator cuff tear?

Rehabilitation plays a critical role in both the nonsurgical and surgical treatment of a rotator cuff tear.

When a tear occurs, there is frequently atrophy of the muscles around the arm and loss of motion of the shoulder. An exercise or physical therapy program is necessary to regain strength and improve function in the shoulder.

Even though surgery repairs the defect in the tendon, the muscles around the arm remain weak, and a strong effort at rehabilitation is necessary for the procedure to succeed. Complete rehabilitation after surgery may take several months.