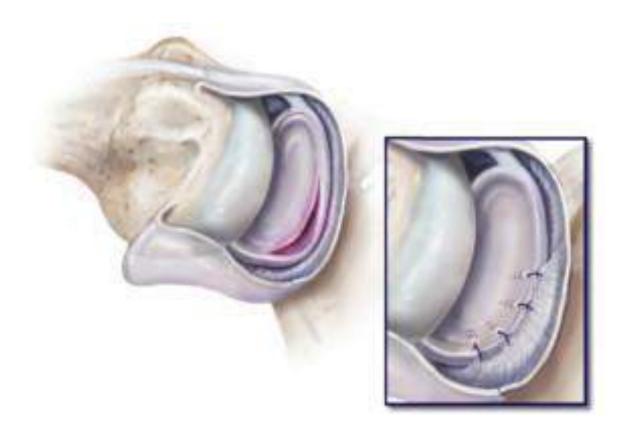
Arthroscopic Repair of Recurrent Dislocation of Shoulder

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The shoulder joint is the most mobile joint in the body. Such mobility is possible because of the unique design of the joint- a small socket and a big ball. It is for this reason that the ball often comes out of the socket with ease. Once the shoulder dislocates the tissues keeping the ball inside the socket get ripped off. In 40 percent of cases, the tissues fall back in place and heal up once the ball is relocated. In the rest the healing does not occur. There remains a weak spot through which the ball can come out repeatedly. After the first dislocation, there are 60% chances that it will dislocate again. Once it has dislocated twice, it will definitely dislocate sometime in the future.



What are the treatment options?

Surgery is the only option to fix this problem. One may decide to live with it but this has its own fallouts. Physiotherapy alone is of no help, as it does nothing to undo the basic defect.

What if does not get operated?

The shoulder will continue to dislocate. With each dislocation shoulder becomes more unstable and consequently dislocates with minor, even day —to-day movements (even during sleep). The dislocation may happen at the wrong time. For example, while trying to hold something to avoid a fall. After sometime, the bones get damaged and the joint becomes painful.

What is done in the surgery?

The surgery consists of repairing the defect. This was done in the past by open method, in which the joint is opened through a 12 cm in front of the shoulder. There are a number of ways to correct the defect by open surgery. The operation is currently done by arthroscopic surgery.

What is arthroscopic surgery?

Arthroscopic surgery is a new technique of key-holes surgery. It is done under general anaesthesia. A thin pencil-like telescope is introduced into the shoulder from behind and the inside of the shoulder examined. Once the defect is identified, it is repaired through two more key-holes. Ultimately you have only three key holes on your shoulder and not a 10 cm cut. The advantages of arthroscopic surgery are no need to immobilize the shoulder for 4-6 weeks, no prolonged physiotherapy and almost no residual stiffness.

What is it like getting the surgery done?

You will be admitted for one day, check up done will be done for fitness for anaesthesia. In case you have any allergy or other issues, inform your doctor. The surgery is done under general anaesthesia, and takes about one hour. You will be in the operation theatre

complex for about four hours for pre and post operative care. Once you are out of anaesthesia, your arm will be in a sling and there will be dressing on your shoulder. You can start eating, walking after about 6 hours and if fit can go home the same evening. You will be given an appointment to see us after 3 days, when the dressing will be replaced with waterproof dressing. You can bath and wear regular clothes after this.

You will remain in the sling for two weeks, but can walk around freely. After two weeks, you will be able to use the hand for day-to-day activities. You can drive car after 4 weeks. Some restriction of activities will be there for 6 weeks. You can go back to normal activities including sports after about 3-6 months.

How long will I need to do physiotherapy after surgery?

Most patients do very well with a 6-8 weeks home physiotherapy programme. In this, our physiotherapist teaches the patients exercises to be done at home twice a day. Some need physiotherapy under supervision and have to visit the clinic.

How much will the surgery cost?

The surgery costs Rs. 75 thousand in general ward category. In some cases, depending upon the complexity of the operation, the cost may be higher. The cost of arthroscopic surgery is more than that of the open surgery as it requires sophisticated equipment and technical expertise. A number of imported disposable items are used in this surgery, which makes it more expensive. Open surgery costs approximately 45 thousand.

What are the chances of recurrence?

The success of operation depends upon three factors

(a) How bad the joint is to start with

- (b) How accurately the repair has been done
- (c) The healing potential of the patient.

Inspite of the best techniques, there is a 2-4 percent recurrence rate even in the best centres in the world. The recurrence rate is the same whether the procedure is done by open arthroscopy method. There are more chances of the shoulder getting stiff after open surgery.

In case you have any queries, you are welcome to contact us at the following number 09554066663, 09554066664, 09554066665

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