

Getting athletes back in the game sooner following shoulder injuries

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(Medical Xpress)—Athletics have always been a part of Jade Dismore's life. The 27-year-old native of South Africa grew up playing tennis and swimming; as an adult she became an avid runner and recreational volleyball player. For several years she felt soreness in her shoulder, but assumed it was nothing serious. As she began training for her first triathlon, the pain became increasingly severe. After trying to manage the pain on her own for years, Dismore decided it was time to seek medical attention.

"I started feeling dull pain in my shoulder about four or five years ago and tried to care for it with regular massages and by seeing a chiropractor," explained Dismore. "When I was training for the triathlon and doing a lot of swimming, I realized it was a serious problem. The harder I trained, the worse it became. I was in pain all the time."

She made an appointment with Northwestern Medicine orthopaedic surgeon Michael Terry, MD, who suspected she was suffering from an overuse injury of the shoulder. After a <u>physical exam</u> and MRI, Dismore was diagnosed with a SLAP tear – a shoulder injury that often requires surgery and up to four months of rehabilitation before return to athletic activity. Fearful that treatment may shut down her training for months, she was thrilled when Terry recommended an alternative minimally-<u>invasive surgery</u> called biceps tenodesis that could potentially cut her rehab time in half.

"Biceps tenodesis is a relatively new way to treat superior labral tears,



but it's quickly gaining popularity for treating these tears because it allows athletes to return to play much sooner than other surgical options," said Terry, an <u>orthopaedic surgeon</u> and <u>sports medicine</u> specialist at Northwestern Memorial Hospital and associate professor of orthopaedic surgery at Northwestern University Feinberg School of Medicine. "Most patients who undergo this procedure find that they are able to return to activity in six to 10 weeks; other options may require double that time for recovery and rehabilitation."

A SLAP tear occurs in a part of the shoulder called the labrum, which is a cuff of cartilage that forms a cup for the arm bone (humerus) to move within. This type of tear often specifically affects the biceps tendon, a cord-like structure connecting the biceps muscles to the bone at the shoulder as it travels toward the elbow. Athletes who make repetitive overhead actions, such as baseball pitchers or swimmers like Dismore, are most prone to these injuries because of the enormous stress those activities place on the shoulder.

"The shoulder is similar to a hip in the sense that it's a ball and socket joint, but the shoulder is very shallow making it potentially unstable and prone to overuse injuries," said Terry. "SLAP tears can also result from a fall on an outstretched arm or lifting a heavy object. Patients who have this type of labrum tear will experience pain like Jade had, as well as other symptoms including decreased range of motion, popping and clicking in the joint and a feeling of instability in the shoulder."

While conservative treatment such as rest, icing, anti-inflammatory medications and physical therapy may be the first approach to managing a SLAP tear, many patients are unable to return to full athletic capability without surgery. Biceps tenodesis is an outpatient arthroscopic procedure during which the surgeon approaches the tear through two small incisions to cut the normal attachment of the biceps tendon then reattaches it to a position that is out of the way of the shoulder joint,



limiting the distracting force that the biceps places on the labrum.

"By removing tension on the injured area, this procedure alleviates pain and discomfort and allows the restoration of mobility and strength in the arm," Terry explained. "As more surgeons become trained in this technique, it will likely eclipse other <u>surgical options</u> to fix these types of shoulder injuries in many cases. Not only are these patients rehabbing quicker, but they are also returning to their pre-injury level of performance."

The procedure, while often performed as part of a larger shoulder surgery such as rotator cuff or SLAP repair, is becoming more common as the primary means for treating this type of injury. Patients who have biceps tenodesis go home the same day and do not require a hospital stay.

Dismore arrived at Northwestern Memorial for surgery in the morning and was home recovering by the afternoon. "Immediately after surgery the pain wasn't too bad and within four weeks I was out of the shoulder sling and starting physical therapy," said Dismore. "In eight weeks, I was back to doing normal activities. I started running again just about 10 weeks after surgery."

Today, a year post-surgery, Dismore's shoulder feels strong and she's back to her full level of activity, even getting ready to train for a second triathlon. "My <u>shoulder</u> feels great and I'm very happy to not have the pain anymore," said Dismore. "I'm exercising four to five days a week, playing volleyball and getting ready to start swimming again this winter."

Outcomes like Dismore's are what Terry strives for with all his patients. "With athletic patients like Jade, the goal shouldn't be to just fix the injury, but to do so in a way that allows them to return to sport quickly and as close as possible to their pre-injury performance level, if not



better," said Terry. "Biceps tenodesis is a treatment that allows these patients to get back to what they love doing with little reminder of being hurt."

Provided by Northwestern Memorial Hospital

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