



Posterior labral repair

The problem:

A tear of the cartilage lining (labrum) on the back of the shoulder joint socket. This may occur from a posterior shoulder dislocation.

Reason for treatment:

Pain and instability.

The treatment:

Surgery is done arthroscopically usually through three small holes. Devices called suture anchors are used to repair the torn labrum. These anchors have sutures attached to them. The anchors are placed in the bone. The suture attached to the anchor is then passed through the torn labrum and tied down to bring the labrum back to the bone as it was originally before it was torn. The anchors are generally not made of metal.

Day of surgery:

The patient arrives 2 hours before the procedure to meet the operative team. A catheter is placed in their vein (IV) and the patient is given a nerve block. The nerve block helps with pain after the surgery for approximately 12 hours. The patient is still put to sleep during the surgery. The surgery itself takes less than one hour, but the setup time in the operating room and the takedown time add one half hour to an hour. The surgery is done with the patient in the sitting position, so care is taken to position the patient appropriately. The patient stays in the recovery room for 1-2 hours. Most patients go home after surgery, but some stay overnight in the hospital for pain control.

After surgery:

The patient wears a sling for 4 weeks. The patient keeps the wound dry for 7 days. Sponge baths are appropriate. The sling is removed only to take a bath or shower and when sitting standing while awake and away from crowds. It should always be worn when asleep during the first 4 weeks. Physical therapy is started at the 4 weeks and continues for 3 months.

Recovery is usually complete at 4-6 months.

The shoulder is very painful for several days and is uncomfortable for several weeks. Pain is managed with ice and pain killers. Anti-inflammatory medication may be started at 4-6 weeks if needed.