www.simonmoyes.com





Welcome from Simon Moyes

Simon specialises in arthroscopic and minimally invasive treatment for problems of the knee, shoulder, foot and ankle

Simon Moyes specialises in keyhole - or arthroscopic surgery. This is a highly sophisticated, minimally invasive technique which means you spend less time in hospital and you are more likely to have a quick recovery.

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- More about Simon's weekly diary

twitter 1st Sep 2010 Consulting at The Wellington

→ Treatment Areas

Mr Simon Moyes offers surgical treatment for problems in these areas of the body:

Costraight to the specific condition you are looking for by using the drop down below:



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Specific condition \$

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www.shoulder-arthroscopy.co.uk



Subacromial Impingement

Presented by Mr Simon Moyes

Impingement

Pathophysiology

- Anatomic
- Overuse
- Age

Subtypes

- Supraspinatus tendinitis
- Subacromial bursitis
- ACJOA
- Labral tears



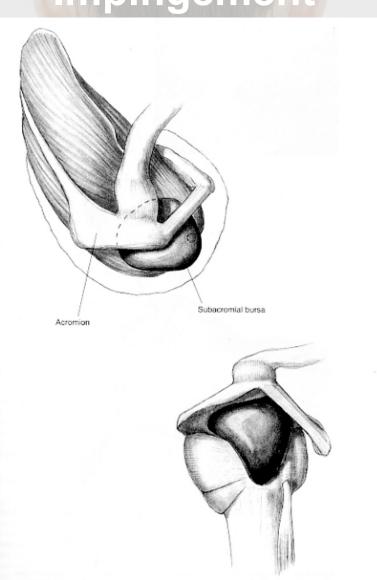
Impingement











Impingement

Each time the arm is raised, there will be some degree of impingement on the tendons and the bursa as the humerus is being forced against the edge of the acromion. It is only with prolonged or intensive activity involving raising the arm, that impingement can damage or irritate the rotator cuff tendons and the bursa, causing a problem.

Impingement may get worse if another condition decreases the space between the acromion and the rotator cuff tendons. Bone spurs (osteophytes) caused by ageing or overuse of the acromioclavular joint (ACJ) can reduce this space, as this joint is directly above the rotator cuff tendons and bursa.

Impingement syndrome is quite a common condition, most often seen in ageing adults. Impingement may occur in combination with subacromial bursitis and rotator cuff tendinitis, both of which are closely related conditions.



Symptoms

Symptoms of impingement include:

- Pain and weakness in the shoulder muscles, especially when lifting the arm over the head, out to the side or reaching up behind the back.
- Difficulty sleeping, especially when rolling on to the shoulder.
- Joint may start to feel stiffer over time.
- Pain may at the front/side of the shoulder during overhead activities (swimming, throwing) or at the back/front of the shoulder when holding the arm out to the side and turning outwards.



Treatments

Shoulder impingement syndrome can be treated

in a number of ways.

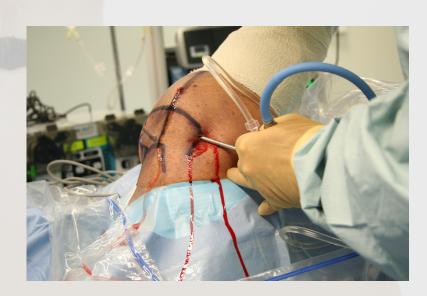
- Anti-inflammatories 8/52
- Physiotherapy
- Steroid injections
- Arthroscopic surgery

Symptoms can sometimes indicate a rotator cuff tear in which case a surgical repair may be necessary. Most cases of impingement are successfully treated with anti-inflammatory medication, stretching and temporarily avoiding overhead activities.

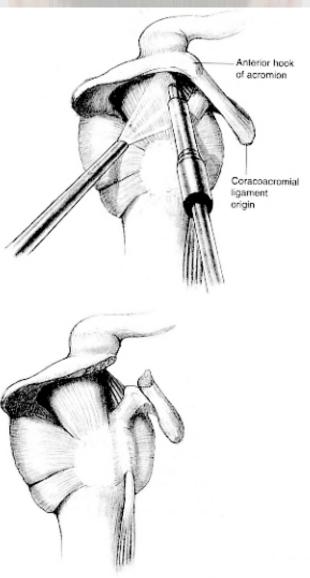


Surgery

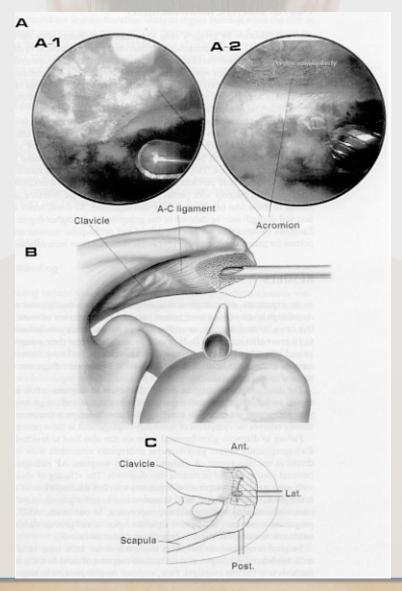
Subacromial Decompression is a surgical procedure which aims to increase the amount of space between the rotator cuff tendons and the <u>acromion</u>, taking pressure off the tissues under the acromion. The surgeon will remove any anterior and lateral bone spurs from the acromion which may be rubbing against the bursa and rotator cuff tendons. The CA ligament is divided. The acromion is then smoothed from lateral to medial; anterior to posterior.

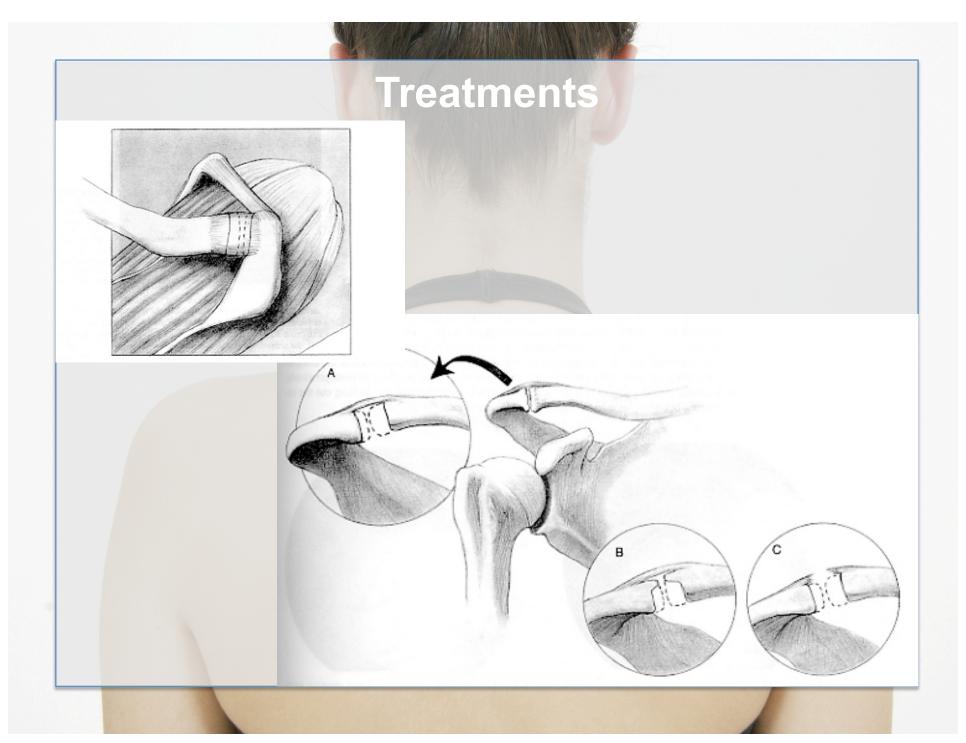


Treatments



Treatments





Surgery

The surgeon may also remove a small section of the acromion to provide yet more space for the tendons. Removing part of the acromion surgically is called **Acromioplasty**. This is yet another measure to remove pressure from the tissues between the acromion and the humerus bone.

If the shoulder joint is also affected by arthritis to the AC joint, a **Resection Arthroplasty** may be required in which the end of the clavicle (collar bone) may be removed.

Shoulder surgery requires a long rehabilitation period. Physiotherapy may be required and full recovery may take several months.











