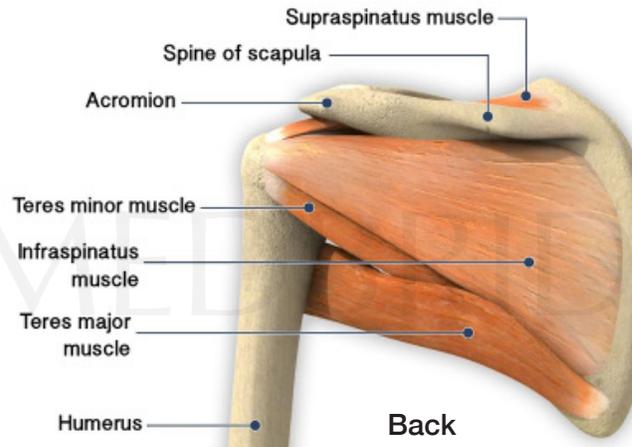
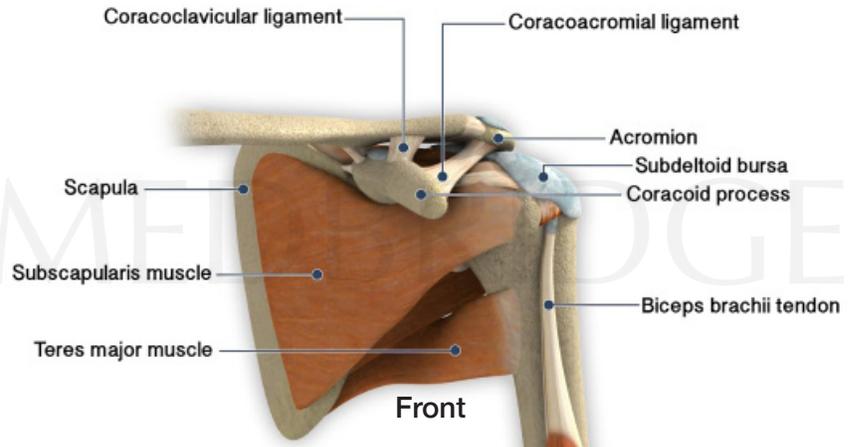


Region

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Anatomy

The term “rotator cuff” refers to 4 muscles of the shoulder girdle that help to support the shoulder joint by holding together the humerus (upper arm bone) and the scapula or shoulder blade. One end of the muscles attach to the shoulder blade, while the tendons of the cuff muscles attach to the humerus. Below are views of the muscle group from the front and back.


Function of Rotator Cuff

The rotator cuff muscles, through their attachments to both the shoulder blade and the upper arm, help to lift and rotate the arm inward or outward. The muscles work together to keep the upper arm bone positioned in the shallow cup located on the shoulder blade.

Causes of Rotator Cuff Dysfunction

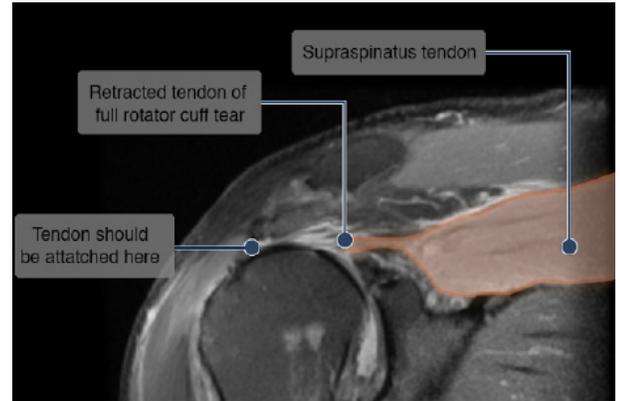
Causes of a rotator cuff injury can include falling on the shoulder (especially if your arm is outstretched), or lifting something heavy. Chronic tears related to shoulder overuse could also occur over a longer period of time due to the tendon being inflamed or compressed. Risk factors for having a tear in the rotator cuff muscles of the shoulder can include sporting activities such as overhead throwing, particularly in younger people, and overuse injuries in people over age 40. Work activities that involve repetitive lifting can also contribute to a person to having tears in the rotator cuff.

Symptoms of Rotator Cuff Dysfunction

Patients who have a rotator cuff tear often complain of pain that occurs during movement or rest. You may notice a loss of ability to move or lift the shoulder beyond shoulder height. Loss of muscle mass or bulk or general weakness may be noticed in the presence of a rotator cuff injury.

Physical Therapy for Rotator Cuff Tear

According to the American Academy of Orthopedic Surgeons, about 50% of patients will have decreased pain and increased function with nonsurgical treatment such as physical therapy. Additionally, a Cochrane database review concludes that there is no significant difference in outcome between surgery and “active nonoperative treatment².”



Your rotator cuff rehabilitation will begin with a thorough evaluation of the shoulder region and nearby areas such as the neck that can cause shoulder pain. Improving your posture and avoiding repetitive tasks are common modifications that can also ease pain and promote healing.

A recent study of non-traumatic rotator cuff tears in which patients were treated with either 1) physical therapy, 2) acromioplasty (a surgery to remove bone tissue) and physical therapy, or 3) rotator cuff repair, acromioplasty and physical therapy found that operative treatment is not better than conservative treatment for non-traumatic tears of the supraspinatus. The findings led the study authors to state that first line treatment for this condition should be conservative care³.

Prior to considering surgery, a physician will often refer to physical therapy. Fortunately, the research states that if a patient progresses to surgery, a delay in treatment negatively affects surgical outcomes¹. Even if a patient undergoes surgical repair for a rotator cuff tear, physical therapy plays an important role in patient function, both before and after an operation.



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3. Kukkonen, J., Joukainen, A., Lehtinen, J., Mattila, K. T., Tuominen, E. K. J., Kauko, T., & Äärimaa, V. (2014). Treatment of non-traumatic rotator cuff tears: A randomised controlled trial with one-year clinical results. *Bone & Joint Journal*, 96(1), 75-81.