



Shoulder MUA (manipulation
under anaesthetic) **+/-**

arthroscopic release

Advice and Exercise Leaflet



**Nuffield
Health**

General Guidelines

- Wear your **SLING** for comfort. Do **NOT** wear the sling for long periods of time without moving it or completing your exercises. Discard the sling when you feel able, usually a few days post surgery.
- Dressing, showering and cooking can be difficult to start with, especially if it is your dominant hand, but please try to use your arm as much as pain allows.
- Only complete the exercises on this leaflet as taught by your physiotherapist and within the limits of your pain.
- You can expect pain after the surgery, to manage this make sure to take your **regular** pain relief as prescribed, and you can also use ice on the shoulder for 20minutes every 2 hours.
- **Sleeping** can be uncomfortable in the first few weeks. Try to lie on your back with a pillow behind your operated arm, or on your opposite side and use a pillow underneath your arm and forearm to rest your hand on.
- **Driving** from approximately 2 weeks is safe, as your pain and movement allows. You need to be able to work all of the controls, be comfortable holding the steering wheel and safely complete an emergency stop.
- **Return to work:** Sedentary 2-4 weeks (as pain allows) Physical or manual jobs may require longer absence of 6 weeks. You can discuss returning to work with your physiotherapist/ consultant.

Home Exercises

Complete the exercises as your pain allows and within the limitations explained.

You can start your exercises when your nerve block wears off

It is normal to feel aching, discomfort or stretching sensation when doing the exercises; however if you experience intense and lasting pain (more than 30 minutes) do it less forcefully and less often. If this does not help, then discuss with your physiotherapist.

Repeat the exercises little and often. Aim for 5-10 minutes, 4 times a day.

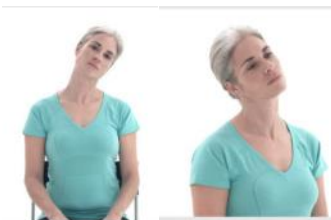
You will need to get into the habit of doing your exercises as a routine for several months to get the best results from surgery.

Posture - Try to maintain good posture at all times; do not be tempted to slump or round your shoulders.

Scapular Setting—Thinking about the 2 points of your shoulder blades, imagine drawing them up and back towards each other. Hold contraction for 5 seconds.



Neck movement - tilting your head from side-to-side; and also turning to look over your left then right shoulder gently, to stop your neck becoming stiff.



Elbow movement - take the sling off and allow your elbow to fully straighten. You may find this more comfortable when the arm is supported e.g. when lying down.



Pendular exercises

Lean forwards and allow your arm to gently swing forwards and backwards, side-to-side, and in circles.



Flexion

Lying on your back, sitting or standing.

1. Hold the wrist of your operated arm with your other hand. Use your good hand to lift your arm up in front of you.



2. Both hands on a table or kitchen counter - walk your feet backwards.



3. Both hands on a table, or if you can manage on all 4s, either slide your hands across the table, or sit back on to your heels.



External Rotation

Lying on your back, sitting or standing.

1. Holding a stick, use your non-operated arm, to assist your operated arm to rotate outwards.



2. Standing in a doorway, place your hand/ wrist on the doorframe, step your feet to turn your body away from your arm.



Extension

Holding a stick, use your non-operated arm, to assist your operated arm backwards.



Isometric external rotation

Standing next to the wall, gently push your operated hand into the wall as though you are going to rotate your arm outwards. Adjust the pressure as pain allows. Hold for 5-7 seconds.



Isometric internal rotation

Standing in the doorway, gently push your operated hand/ forearm into the wall as though you are going to rotate your arm inwards. Adjust the pressure as pain allows. Hold for 5-7seconds.



If these exercises are too difficult / painful to complete please contact the physiotherapy department.

You will have a physiotherapy appointment at 1 week after your surgery, where they will begin to progress your exercises.

Please do contact us if you have any problems or questions.

At home:

Loose fitting clothing is easier to wear initially after your surgery e.g. shirts/ cardigans with buttons

Getting back to activity:

- Your ability to restart activities will depend on your pain, range of movement and strength. Nothing is forbidden! It is challenging to guide on timelines to return due to the large differences between patients. Your physiotherapist and surgeon will advise you.
- To start with you want to complete activities for a short time and then gradually increase. Returning to non-contact sports around 4-6 weeks, and contact sports after 8-10 weeks.
- Once the wounds are healed you can try movements in water. Skulling or breast stroke may be easier initially after around 2 weeks. Then freestyle at 6-8 weeks.
- You can exercise the rest of your body immediately. Try to regain the natural swing of your arm as you walk.

Your ability to get back to activity can be affected by your activity levels and movement before the surgery.

Unfortunately, sometimes you may find it is difficult to regain movement even though you are trying very hard. Reaching up behind your back is usually the hardest movement and last one to achieve. The aim for the surgery is to improve your ability. You may not regain perfect movement.

Most improvement is seen in the 4-6 weeks, however strength and movement can continue to improve for 18 months to 2 years.

For an appointment at the
Nuffield Health Wessex Hospital
please telephone:

0845 045 48 45

If you have any problems or concerns please telephone:



Nuffield Health Wessex Hospital

Telephone: 023 8025 8406

Email: wessex.physiotherapy@nuffieldhealth.com

Winchester Road, Chandlers Ford,

Eastleigh, Hants SO53 2DW

It is company policy to provide credit/debit card details on arrival of appointments.