





Ortholnfo Basics

Rotator Cuff Tears

One of the most common middle-age complaints is shoulder pain. A frequent source of that pain is a torn rotator cuff.

A torn rotator cuff will weaken your shoulder. This means that many daily activities, like combing your hair or getting dressed, may become painful and difficult to do.

What is a rotator cuff?

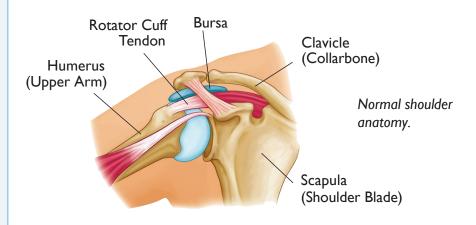
Your rotator cuff helps you lift your arm, rotate it, and reach up over your head.

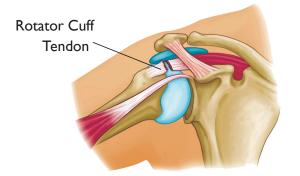
It is made up of muscles and tendons in your shoulder. These structures cover the head of your upper arm bone (humerus). This "cuff" holds the upper arm bone in the shoulder socket.

Rotator cuff tears come in all shapes and sizes. They typically occur in the tendon.

Partial tears. Many tears do not completely sever the soft tissue.

Full thickness tears. A full or "complete" tear will split the soft tissue into two, sometimes detaching the tendon from the bone.





A complete tear of the rotator cuff tendon.

Ortholnfo Basics — Rotator Cuff Tears



What causes rotator cuff tears?

There are two main causes of rotator cuff tears: injury and wear.

Injury. If you fall down on your outstretched arm or lift something too heavy with a jerking motion, you could tear your rotator cuff. This type of tear can occur with other shoulder injuries, such as a broken collarbone or dislocated shoulder.

Wear. Most tears, however, are the result of a wearing down of the tendon that occurs slowly over time. This naturally occurs as we age. It can be worsened by excessive activityrepeating the same shoulder motions again and again.

This explains why rotator cuff tears are most common in people over 40 who participate in activities that have repetitive overhead motions.

Baseball, tennis, and weightlifting are some sports examples. Many jobs and routine chores can cause overuse tears, as well.

Rotator cuff tears in younger people are usually caused by an accident, like a fall. Overuse tears caused by sports or overhead work also occur.

How are tears diagnosed?

A rotator cuff injury can

Your doctor will base a diagnosis on your symptoms and a physical examination.

During the examination, your doctor will move your arm in several different directions. measuring your shoulder's range of motion. How well you can move your arm on your

information about the cause of your pain.

own also gives your doctor important

How much pain and weakness a tear causes varies from person to person. Many people may not even realize they have a small rotator cuff tear.

Other tests which may help your doctor confirm your diagnosis include:

X-rays. The first imaging tests performed are usually x-rays. Although they do not show tears of the rotator cuff, x-rays may show other

make it painful to lift your arm to the side. problems in the shoulder joint. **Magnetic resonance imaging (MRI)** and ultrasound. These studies can create better images of soft tissues like the rotator cuff tendon. They can help determine the location, size, and extent of a tear. These studies can also show if other tissues are injured, as well.

Ortholnfo Basics — Rotator Cuff Tears

How are tears treated?

The goal of treatment is to reduce pain and restore function.

In planning your treatment, your doctor will consider your age, activity level, general health, and type of tear you have.

Over 50% of patients find relief from their symptoms without surgery. Your doctor may begin your treatment with nonsurgical options.

Rest. The first step toward recovery is to avoid overhead activity.

Nonsteroidal anti-inflammatory medicines. Drugs like aspirin and ibuprofen reduce pain and swelling.

Steroid injections. Cortisone is a very effective anti-inflammatory medicine. Doctors use injections cautiously because in some cases they may weaken the soft tissue.

Physical therapy. Specific exercises will restore movement and strengthen your shoulder.

Your exercise program will include stretches to improve flexibility and range of motion.

Strengthening the muscles that support your shoulder can relieve pain and prevent further injury.

Surgery. If your symptoms do not improve, your doctor may recommend surgery.

If you are very active and use your arms for overhead work or sports, you may be a candidate for surgery. Surgery may be the right choice for you for other reasons, as well.

Lasting symptoms. If your symptoms have persisted for more than 6 months, surgery may be suggested.

Large tear. Tears that are more than 3 centimeters are often surgically repaired.

Weakness. If weakness in your shoulder prevents daily activities, surgery may be the best option.

Trauma. If your tear was caused by a fall or other type of accident, you may have additional injuries. Surgery may be the most effective way to treat them all.

What will rehabilitation be like?

Whether your treatment involves surgery or not, rehabilitation plays a vital role in getting you back to your daily activities. A physical therapy program will help you regain shoulder strength and motion.

Expect a complete recovery to take several months. Although it is a slow process, your commitment to therapy is the most important factor in returning to all the activities you enjoy.



Ortholnfo Basics — Rotator Cuff Tears

For more information

For more information about rotator cuff tears and their treatment, visit *OrthoInfo* at www.orthoinfo.org.

OrthoInfo is the patient education website of the American Academy of Orthopaedic Surgeons (AAOS), and is a trusted source of information about musculoskeletal conditions. Our articles are developed by orthopaedic surgeons, and provide detailed information about a wide range of injuries and diseases, as well as treatment options and prevention topics.

AAOS does not endorse any treatments, procedures, products, or physicians referenced herein. This information is provided as an educational service and is not intended to serve as medical advice. Anyone seeking specific orthopaedic advice or assistance should consult his or her orthopaedic surgeon.



Information provided as a courtesy of the American Academy of Orthopaedic Surgeons and Ryan M. Fisher, MD.

Discover additional patient educational resources at RyanFisherMD.com

© 2019 American Academy of Orthopaedic Surgeons