

Rotator Cuff Tears: Frequently Asked Questions

What is the rotator cuff and what does it do?

The rotator cuff is a large tendon comprised of four muscles which combine to form a "cuff" over the upper end of the arm, the head of the humerus. The four muscles—supraspinatus, infraspinatus, subscapularis and teres minor—originate from the "wing bone," the scapula, and together form a single tendon unit that [inserts](#) on the greater tuberosity of the humerus.

The rotator cuff helps to lift and rotate the arm and to stabilize the ball of the shoulder within the joint.

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What causes a rotator cuff tear and how would I know if I have one?

A rotator cuff tear may result from an [acute injury](#) such as a fall or may be caused by chronic [wear and tear](#) with degeneration of the tendon. Impingement of the front of the scapula, the acromion, on the tendon is believed to be a major cause of cuff tears in individuals older than 40 years.

Typically, you will feel pain in the front of your shoulder that radiates down the side of your arm. It may be present with overhead activities such as [lifting](#) or reaching. You may feel pain when you try to sleep on the affected side. You may note weakness of your arm and difficulty with routine activities such as combing your hair or reaching behind your back.

If the tear occurs with [injury](#) you may experience acute pain, a snapping sensation, and immediate weakness of the arm.

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If I have a painful rotator cuff and keep using it, will this cause further [damage](#)?

A rotator cuff tear can extend or get larger over time. This can occur with [repetitive](#) use or a re-injury. It is common for patients with known rotator cuff disease to have acute pain and weakness following a minor injury. This likely represents extension of an existing tear.

If you know you have a rotator cuff tear, then worsening pain and [decreasing](#) strength may mean the tear is getting larger.

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When should I [see](#) a doctor for a rotator cuff tear?

If you have injured your shoulder or have [chronic](#) shoulder and arm pain, it is best to see your [orthopaedic surgeon](#). He or she can then make a diagnosis and begin treatment. The doctor may recommend a diagnostic study such as MRI ([magnetic resonance imaging](#)) to confirm the diagnosis.

Early [diagnosis and treatment](#) of a rotator cuff tear may prevent symptoms such as loss of strength and loss of motion from setting in.

If your primary physician has already made the diagnosis, an orthopaedic surgeon can review both surgical and nonsurgical options and start treatment.

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Can a rotator cuff tear be healed or strengthened without [surgery](#)?

Many rotator cuff tears can be treated nonsurgically. Anti-inflammatory [medication](#), [steroid injections](#), and [physical therapy](#) may all be of benefit in treating symptoms of a cuff tear. The goals of treatment are to relieve pain and restore strength to the involved shoulder.

Even though most tears cannot heal on their own, satisfactory function can often be achieved without surgery.

If, however, you are active and use your arm for overhead work or sports, then surgery is most often recommended because many tears will not heal without surgery.

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At what point does a rotator cuff tear require surgery to fix it?

Surgery is recommended if you have persistent pain or weakness in your shoulder that does not improve with [nonsurgical treatment](#). Frequently, patients who require surgery will report pain at night and difficulty using the arm for lifting and reaching. Many will report ongoing symptoms despite several months of medication and limited use of the arm.

Surgery is also indicated in active individuals who use the arm for overhead work or sports. Pitchers, swimmers, and tennis players are common examples.

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What options are available for surgical repair?

The type of repair performed is based on the findings at surgery. A partial tear may require only a trimming or smoothing procedure called a débridement. A full-thickness tear within the substance of the tendon can be repaired side to side. If the tendon is torn from its insertion on the humerus, it is repaired directly to bone.

Three techniques are used for rotator cuff repair: traditional open repair, mini-open repair, and arthroscopic repair.

Your orthopaedic surgeon can recommend which technique is best for you.

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How important is rehabilitation in the treatment of a rotator cuff tear?

Rehabilitation plays a critical role in both the nonsurgical and surgical treatment of a rotator cuff tear.

When a tear occurs, there is frequently atrophy of the muscles around the arm and loss of motion of the shoulder. An exercise or physical [therapy](#) program is necessary to regain strength and improve function in the shoulder.

Even though surgery repairs the defect in the tendon, the muscles around the arm remain weak, and a strong effort at rehabilitation is necessary for the procedure to succeed. Complete rehabilitation after surgery may take several months.

Your orthopaedic surgeon can prescribe an appropriate program based on your needs and the findings at surgery.

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