

# AC Joint Stabilisation Surgery

The aim of this procedure is to improve comfort and stability of the AC joint, generally in cases of AC joint dislocation where symptoms have not settled adequately through non-operative treatments over many months. The results of AC joint treatments are variable with some cases reporting some ongoing pain, prominence and functional disturbance. However, with a starting point of chronic significant pain and disability, the majority of patients find worthwhile improvement with AC joint stabilisation surgery. There are a number of different techniques, with most techniques involving biological repair or replacement of the injured ligaments with some kind of fixation to hold the position of the AC joint during tissue healing.

## Procedure

- General anaesthetic and local infiltration
- Usually one night in hospital
- Incision over the AC joint, trimming outer end of the clavicle and removing scar tissue
- Reconstruction of torn coracoclavicular ligaments by acromioclavicular ligament transfer, repair of AC ligaments
- Protection of the repair with a special metal plate and screws (hook plate)
- Sling applied at the end of the procedure

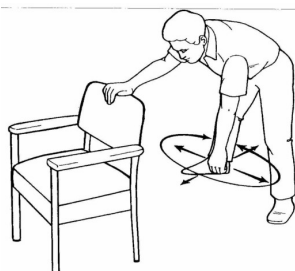
## Day One Post-Op

- Routine x-ray of shoulder
- Shower in temporary sling, wear main sling other times
- Pendulum exercise - 30 seconds twice a day

## Pendulum Exercise

You can see a video demonstration at <http://tinyurl.com/pendulumexercise>

1. Lean forward and hang your arm
2. Swing your arm in a gentle circle, building towards a 30 centimeter diameter.



## Rehabilitation

- Wear sling for 6 weeks from surgery
- Wean off sling over 3 days, 6 weeks after surgery
- Don't lift heavier than 2 kilograms initially and avoid rapid movements
- Physiotherapy
- Day surgery to remove plate and screws under general anaesthetic 4 – 5 months following initial procedure

### Rehabilitation and Physiotherapy Guidelines

- Initially work on posture, scapula control, range of motion
- Normalise patterns of use for activities of daily living
- Light theraband inner-range strengthening when 70% range of motion is re-established (usually around 10 weeks post-surgery)
- **Note that some pain and stiffness is expected while the plate is still in**
- After removal of the plate, 2 weeks of light sling use for comfort, then recommence rehabilitation
- Usually gym-based strengthening can commence approximately 4 weeks after plate removal
- Generally the earliest return to more challenging shoulder activities, such as rugby, is 6 or more months post surgery – but controlled heavy lifting can be performed earlier
- Overall improvement will continue to for 12 – 18 months after surgery

## Return to Work Guidelines

Often the initial return to work is part-time hours and modified duties, gradually building up.

- **Sedentary work with arm in sling:** 7 – 10 days
- **Light two-handed duties and driving:** 6 – 7 weeks
  - **Medium lifting below eye level:** 3 months
  - **Heavy work:** depending on progress