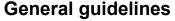


Exercises following Latarjet repair

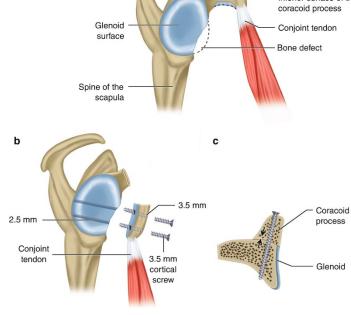
This leaflet gives advice and exercises following Latarjet repair surgery. If you have any questions or concerns, please speak to your physiotherapist.

What is a Latarjet repair?

This procedure is performed where there is bone loss from the front of the glenoid (shallow cup on shoulder blade), which occurs due to repeated dislocations of the shoulder. It involves transferring the coracoid process (another part of the shoulder blade) and the attached muscles to the deficient glenoid rim. This restores the glenoid surface and improves joint stability.



 Pain: A nerve block may be used during the procedure. This means that immediately after the operation the shoulder and arm can feel numb for a few hours. The shoulder will be sore when this



Acromion

- wears off and this may last for a few weeks. It is important that you continue to take the painkillers as advised by the hospital. Ice packs may also help reduce pain. Wrap frozen peas / crushed ice in a damp, cold towel and place on the shoulder for up to 10 minutes. Allow at least 20 minutes between each application of the ice pack.
- Wearing a sling: You will return from theatre wearing a sling and body belt (strap around the
 waist). The sling is worn continuously for 3-6 weeks, as is the body belt. You will only remove
 the sling for specific exercises. Your physiotherapist will advise you of these.
- Hygiene: You will be unable to bath or shower for three weeks or until you can remove the sling and will need to strip wash. It is possible, by leaning forward slightly, to get a baby wipe or face cloth under the armpit of the side in the sling. You are very likely to need assistance to wash your back so it is advisable to try and organise some help from family and friends beforehand. If this is not possible we can organise a package of home care for you before you leave hospital, if required.
- **Driving:** You can resume driving 6 weeks after surgery at the earliest, and **dependent on consultant's decision**.
- **Returning to work:** Light duties (desk-based) from two weeks, heavier duties from three months.
- Leisure activities: Swimming breaststroke from six weeks, freestyle from 8-12 weeks; golf, football, rugby, horse riding, racquet sports etc from three months, but again at the consultant's discretion.

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• **Follow up appointments:** You will be referred to outpatient physiotherapy on discharge. You will be given a clinic appointment with your surgeon or specialist physiotherapist three months after surgery. This can be moved forward if you have any significant problems.

Exercises

You must wear the sling for 3-6 weeks. Throughout your rehabilitation you must always be guided by your pain. Do not force, stretch or stress the repair before the timeframes stated in the following exercises. The exercises should be done a minimum of 10 times each, three times a day. (This may seem like a lot but it's been proven that 'little and often' is the best way to improve recovery and the exercises will get easier the more you do them, so please persevere.)

Day 1 – 3 weeks	
 Begin elbow exercises: Bend and straighten the elbow. With a bent elbow turn the forearm over in a clockwise and anti-clockwise direction. 	
 Begin wrist and hand exercises: Bend the wrist forwards and backwards. Tilt the wrist from side to side. Circle the wrist in a clockwise and anticlockwise direction. Squeeze and make a fist. Ensure you maintain a good upright posture in your sling. 	
2 weeks onwards	
Continue elbow, wrist and hand mobility exercises. Begin gentle pendulum exercises: In a standing position, lean forwards and allow the arm to hang pointing towards the floor. Then gently circle the arm both clockwise and anti-clockwise.	
 Standing, holding a stick or broom, use the good arm to push the operated arm away from the body and upwards. Only push the arm as far as you feel comfortable. 	

• Standing, slide the operated arm up the wall in front of you (see right).



 Standing, grasp a stick behind your back; use the good arm to assist the operated arm lifting the stick away from your bottom



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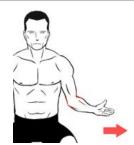
3-6 weeks onwards: Gradually progress from assisted exercises to active exercises (progress from using your stick or other hand to help, to doing the exercises unassisted).

- Standing, slide the operated arm up the wall in front of you (see top right).
- Standing, lift the operated arm above your head unassisted (see bottom right).



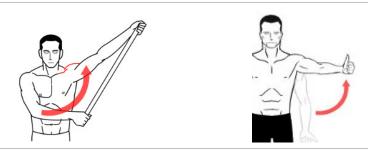
- Sitting or standing, tuck your elbows into your side, elbows bent and hold a stick or broom between your hands (see below left).
- Use the good arm to assist the operated arm in a movement away from the body. Turn the arm away from the body unassisted (see below right).



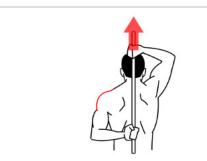


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- Standing, holding a stick or broom, use the good arm to push the operated arm away from the body and upwards (see below left).
- Standing, lift the arm away from the body and upwards unassisted (see below right).



- Standing, lower the stick down your back using your good hand. Reach up behind your back grasping the stick in your operated side's hand. Use the good arm to gently lift the hand up the back (see below left).
- Standing, lower a towel down your back using your good hand. Reach up behind your back grasping the towel in your operated side's hand. Lift the operated arm as much as possible up behind the back, using the good arm to assist it (see below centre).
- Standing, lift the operated arm up behind the back unassisted. A towel under the arm provides a small amount of traction and may make the exercise more comfortable but is not essential (see below right).







Further information

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For questions or concerns, please contact: Daniel Wiltshire

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Or Catherine Anderson E-mail: catherine.anderson@royalberkshire.nhs.uk

Images courtesy of http://www.pt-helper.com

To find out more about our Trust visit www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

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