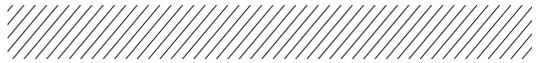


In this issue we welcome a new physio on board. **RASHAAD JAKOET** works at the Sport Science Institute of South Africa in Cape Town where he rehabilitates athlete's injuries. His first column is about shoulder injuries.

WORDS AND IMAGES: RASHAAD JAKOET



POST-OPERATIVE SHOULDER RECOVERY

There are many reasons to end up in a surgeon's office, but a common one for a mountain biker would be falling hard onto your shoulder. It happens to the most skilful of riders and the best way to avoid it is not to fall (easy peasy). There are a number of structures in the shoulder that can be seriously injured in a fall and repairing them requires very delicate and precise surgical reconstruction methods, each surgical procedure unique to the type of injury sustained. Therefore, my first bit of advice to ensuring a successful outcome after shoulder surgery, is to seek out a surgeon who specialises in shoulder surgeries ONLY. Do your homework and ask a friend, or a friend of a friend who may be in the sports medicine industry, or your GP who they would recommend. Word of mouth referral is often much



Shoulder injuries are common among mountain bikers.

better than a Google search.

The most common shoulder injuries from falling include:

1 CLAVICLE FRACTURES

Clavicle fractures occur when your collar bone breaks and can be treated with or without surgery, depending on the kind of break. A six to 12-week recovery period can be expected.

2 ACROMIOCLAVICULAR JOINT SPRAINS/ DISLOCATIONS

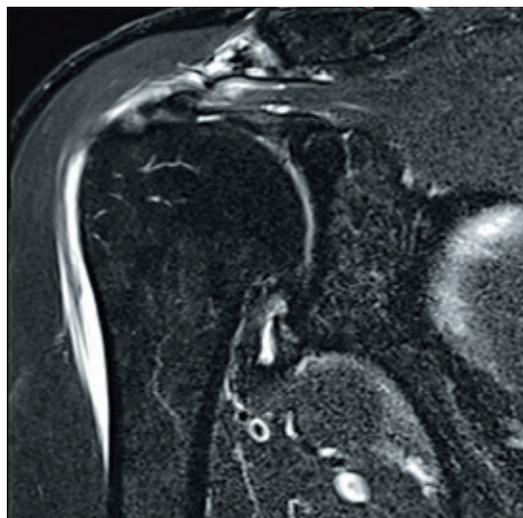
Acromioclavicular joint injuries occur when falling onto the point of your shoulder. They require a complex evaluation after an injury, especially when there is an obvious deformity on the point of your shoulder. The severity of injury will indicate the need for surgery (and the repair procedure) or non-operative treatment, such as immobilisation and physiotherapy. Recovery time is around three months for contact sports.

3 GLENOHUMERAL DISLOCATIONS

Glenohumeral dislocations occur when the head of your humerus (upper arm) separates from the socket. It can



"RECOVERY TIME IS INFLUENCED BY MANY FACTORS, SUCH AS AGE, FITNESS LEVEL, NUTRITION, SMOKING, ETC..."



self-relocate, but often requires medical intervention by an experienced clinician to be placed correctly back in the socket. It only requires surgery if it happens often and there is associated damage (such as rotator cuff tears or damage to the labrum – the ring of cartilage around the socket).

4 ROTATOR CUFF TEARS

Rotator cuff injuries can be as a result of an acute injury such as a fall, or as a result of overuse over a long period of time. Serious (complete) tears require surgical repair and a lengthy period of recovery of about six months to a year, is required for overhead sports. Luckily with biking it should be safe to ride fairly shortly after the operation, as long as there are no post-surgical complications.

After surgery it is important to follow your medical professionals' post-operative instructions, as you could damage the delicate repair work should you deviate from those instructions. You will most likely be referred to a physiotherapist to guide the rehabilitation process, with regular check-ups with the surgeon to ensure that the recovery is going well.

The time frames given are guidelines only, and some patients may recover sooner, some later. Recovery time is influenced by many factors, such as age, fitness level, nutrition, smoking, etc... so do not become despondent if you take a little longer than expected to recover, as long as your physiotherapist and surgeon are unconcerned about any complications.

The goal of physiotherapy is to reduce pain, improve mobility and strength, and ultimately to return the athlete to full function, whether it be at a recreational or professional level. This is done through various different treatment techniques, including manual therapy and specific rehabilitation exercise. It is not enough to simply strengthen weak muscles and is often necessary to re-educate shoulder movement patterns after surgery as muscles weaken after injury and these movement patterns don't necessarily operate in the same way afterwards. This can lead to persistent pain and a different kind of injury at a later stage.

It is important to remember that the body tissues need to be stressed gradually and at the appropriate time and that the absence of pain does not mean that the surgery has healed and that the recovery process is complete! Conversely, some athletes may experience a low level of chronic pain, long after the healing process is complete.

We will be discussing the different treatment techniques and give some examples of rehabilitation exercises in part two, but it is important to remember that an effective rehabilitation program has to be supervised and prescribed by an experienced physiotherapist and it is not advisable to have a DIY approach to it. Your body is the only one you have and it's not a woodwork project that can be scrapped if the DIY approach yields less than optimal results. **fs**

RASHAAD JAKOET has a masters degree in sports physiotherapy from UCT. He has worked and travelled with professional football, rugby and cricket teams over the years. At his practice at SSISA, he works to rehabilitate injuries from athletes in multiple sporting codes, both amateur and professional. Instagram: @rashaadjakoet

