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Distal Biceps Repair

FREQUENTLY ASKED QUESTIONS

Answers to common questions about a torn biceps tendon at the elbow and the surgery to repair or reconstruct it.

UNDERSTANDING THE INJURY

1 What happened to my arm?

The biceps tendon attaches the biceps muscle to the forearm bone just below the elbow. It usually tears when lifting or catching something heavy with the elbow bent. Most people feel a pop, then develop bruising in the elbow and forearm and notice the biceps muscle has moved up the arm.

2 What happens if I don't have surgery?

You will still be able to bend your elbow and do most daily activities, because other muscles help. However, most people have permanent weakness: about **30–40% less strength turning the palm up** (using a screwdriver, opening jars) and about **30% less strength bending the elbow**, along with cramping and fatigue. Non-surgical treatment can be reasonable for people who do not need that strength.

3 Why does timing matter?

Surgery is easiest and most reliable within the first **2–3 weeks**. After that, the tendon shortens and scars, and it may not reach the bone. In that case a **reconstruction** is done, using a graft (usually a donor tendon) to bridge the gap.

YOUR SURGERY

4 What happens during surgery?

Through an incision at the front of the elbow, the tendon is reattached to the forearm bone with an implant such as a button or anchor. Surgery is outpatient; most patients go home the same day. You will have anesthesia, and many patients also receive a nerve block to numb the area for 12–24 hours after surgery.

5 What are the main risks?

- **Numbness on the outside of the forearm** — common, from a skin nerve near the incision; usually improves over weeks to months.
- **Nerve weakness** in lifting the wrist, thumb, or fingers — uncommon and usually temporary.
- **Extra bone formation** that can limit turning the forearm — uncommon.
- Re-tearing (rare, usually from lifting too soon), infection, and stiffness.

RECOVERY

6 Will I be in a splint or brace?

A splint stays on until your first post-op visit (about 7–10 days). You then move to a **hinged elbow brace** for several weeks while motion is gradually increased.

7 What can I do with the arm?

You can use the hand for light tasks like typing and eating. For **6 weeks**: no lifting (not even a cup of coffee), and no forceful bending of the elbow or turning the palm up against resistance.

8 When can I drive and go back to work?

Driving: once out of the splint or brace and off narcotics — typically 4–6 weeks. **Desk work:** often 1–2 weeks, one-handed. **Heavy or manual work:** about 3–4 months.

9 When will I be back to full strength?

Strengthening starts around 6–8 weeks, heavy lifting is usually allowed around **3–4 months**, and full strength returns over **4–6 months**. Most patients regain near-normal strength.

Still have questions? Call our office at **469.800.7200**. After surgery, follow your post-operative instruction sheet — if anything here differs from it, the instruction sheet takes priority.