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Shoulder Labrum Surgery

FREQUENTLY ASKED QUESTIONS

Answers to common questions about labral tears and shoulder stabilization surgery.

UNDERSTANDING THE LABRUM

1 What is the labrum?

The labrum is a ring of cartilage around the shoulder socket. It deepens the socket and anchors the ligaments that keep the ball in place. It can tear from a **dislocation**, a fall, or repetitive overhead activity such as throwing.

2 Why is surgery recommended?

After a dislocation, the torn labrum often does not heal in the right place, leaving the shoulder unstable. Young, active people — especially in contact sports — have a high chance of dislocating again without surgery, and each dislocation can damage the bone and cartilage further.

3 Can I avoid surgery?

Sometimes. Physical therapy can work well for older or less active patients and for some tears that cause pain without instability. We will discuss what fits your shoulder and your goals.

4 What if I have bone loss?

Repeated dislocations can wear away part of the socket. If the bone loss is significant, a labral repair alone is more likely to fail, and a bone-block procedure such as a **Latarjet** may be recommended instead.

YOUR SURGERY

5 What happens during surgery?

Through small incisions, a camera is used to reattach the labrum to the bone with small anchors and stitches. Surgery usually takes 1–2 hours. 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.

6 How should I prepare?

- Practice putting on the sling and getting dressed one-handed.
- Have loose button-up shirts ready.
- Many patients sleep best in a recliner for the first few weeks.
- Arrange help at home for the first several days.

RECOVERY

7 How long will I wear the sling?

At all times, including sleep, for 6 weeks, except for showering, dressing, and exercises. It takes about 6 weeks for the labrum to heal to the bone.

8 What should I avoid?

Your restrictions depend on where the tear was: a front (anterior) repair avoids turning the arm outward; a back (posterior) repair avoids reaching across the body; a top (SLAP) repair avoids resisted elbow bending. Your post-op instructions list your specific precautions.

9 When can I drive and return to work or school?

Driving: once out of the sling and off narcotics — about 6 weeks. **Desk work or class:** often within about 1 week, one-handed. **Manual labor:** usually 3–4 months or more.

10 When can I return to sports?

Non-contact sports around 4 months. **Contact, collision, and throwing sports** typically take **6 months or more**, once you have full strength and motion.

11 Can the shoulder dislocate again?

Most repairs stay stable, but a small percentage of patients dislocate again, especially young athletes in contact sports. Following your restrictions and completing therapy before returning to sport gives the repair the best chance.

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.