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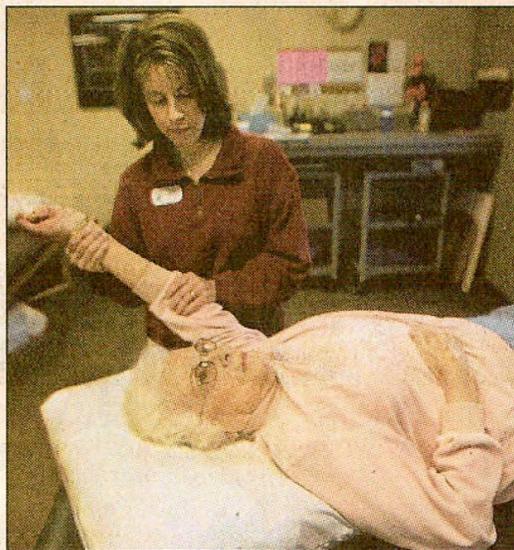
New rotator cuff procedure reduces fear factor

By SAMEH FAHMY
Staff Writer

A painful rotator cuff tear left Mary Lee Zinn of Franklin unable to perform the simplest household tasks, but she feared surgery to correct it would cause even more pain.

"I had heard horror stories about rotator cuff surgery," the 83-year-old says. "I've had friends who have had it, and when you mention it, everyone just groans."

Rotator cuff surgery can be one of the most painful orthopedic procedures, so Zinn's friends weren't exaggerating. A new surgical technique repaired her injury with less pain, and her doctor expects it to make her and other patients less likely to need a second surgery later.

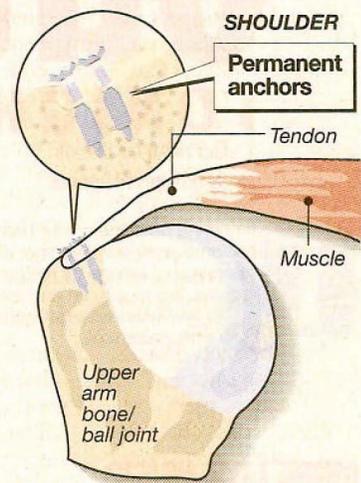


Surgery to repair torn rotator cuffs is often painful, but a new alternative may offer better results with less pain. Mary Lee Zinn of Franklin had the less-invasive surgery at Summit Medical Center in January and is now recovering with the help of physical therapist assistant Angie Wilkerson of Star Physical Therapy.

RICKY ROGERS / STAFF

Rotator repair

A new, minimally invasive surgical technique to repair torn rotator cuffs called the double-row repair is less painful than surgeries that require larger incisions. Because it uses two rows of anchors to connect the tendon to the bone, it may be more durable than traditional surgeries that use one row of anchors or sutures.



Source: Dr. Damon Petty, Summit Medical Center

KENT TRAVIS / STAFF

Inner workings

The shoulder is a ball-and-socket joint held in place partly by four muscles connected to bone by tendons. Collectively, the tendons are known as the rotator cuff.

A rotator cuff tear can occur after a single injury, or it can develop gradually over time as the tendon moves under sharp calcium deposits that can fray them like a rope.

Zinn isn't sure how she tore her left rotator cuff, but it's a pain that she describes as "raw hurt."

"Carrying even my Bible to church was heavy," she says. "And a pocketbook was just out of the question."

Her orthopedic surgeon, Dr. Damon H. Petty of Summit Medical Center, who is the team doctor for the Nashville Sounds, is one of a handful of doctors nationwide performing a minimally invasive technique to repair torn rotator cuffs. The procedure is known as

To learn more

► To learn more about the double row repair for torn rotator cuffs, call Dr. Damon Petty's office at 321-0200 or e-mail him at pettyortho@charterinternet.com.

arthroscopic double-row repair.

Surgeons once performed the surgery by creating a 5-inch incision. That procedure has largely been replaced by a one where incisions are no larger than two inches and a fiber optic camera known as an arthroscope is used.

The problem with that, Petty says, is that the smaller incision still involves separating the deltoid muscle above the shoulder and can leave patients with weeks of pain and stiffness. A second problem is that the procedure is traditionally performed with a single row of sutures that may become unattached after the surgery.

For the past year and a half, Petty

has been performing an entirely arthroscopic surgery, using four tiny incision ports about the diameter of a pen cap. Instead of using a single row of sutures, he uses two rows of anchors, increasing the amount of tendon reattached to the bone.

Petty says the tiny incision ports result in less pain — two to three on a scale of 10 compared to seven or eight for the traditional surgery — and the two rows of anchors might keep the tendon attached up to three times stronger than a suture would.

The main downside of the arthroscopic double row, Petty says, is that it's exponentially more difficult for surgeons to perform than previous surgeries. It's like building a ship in a bottle, he says.

And since the technique is relatively new, it'll still be another year or so before data comparing it to other techniques becomes available.

Dr. John Kuhn, chief of shoulder surgery at Vanderbilt University

Medical Center, says double-row surgery can cost \$2,000 to \$3,000 more than single-row surgery and may not be any less failure prone. He says most rotator cuff surgeries fail because the tissue doesn't heal well, and a second row of anchors won't help that.

But Zinn is already convinced of the benefits of double-row surgery. "I didn't have the pain that some of my friends had," she says, "because I didn't have the incision." ■

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