

Anaesthesia for Shoulder Surgery
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This information sheet provides you with information concerning the anaesthetic for your upcoming shoulder surgery. The exact details of the anaesthetic technique vary from patient to patient, and this will be discussed with you prior to your surgery.

Pre-operative information:

If you have any questions regarding your upcoming anaesthetic or your medications, please contact my rooms **(03 9419 6255)**.

Unless advised otherwise, I would prefer you did not take any blood pressure or diabetic medications on the day of your surgery.

General Anaesthesia:

In almost all cases, patients will be given a general anaesthetic for their shoulder surgery (i.e you will be asleep).

Arthroscopic (keyhole) shoulder surgery is often performed in the 'sitting' position. This means that after you go to sleep, you will be carefully positioned in an upright position to allow performance of your surgery.

To monitor your blood pressure in this position, I will often perform an injection in the wrist (usually when you are asleep) that allows continuous monitoring of your blood pressure. This injection *can leave a bruise & may be sore for a few days*.

Nerve blocks:

For some procedures, I may discuss a nerve block to provide pain-relief following shoulder surgery.

This is performed before you go to sleep but after you have had some sedation. It involves the injection of local anaesthetic under the skin in the neck using ultrasound guidance.

It numbs the nerves that provide sensation and movement to the shoulder and arm.

The block usually lasts 8 – 24 hours, during which time your arm will feel heavy and weak. In addition to excellent pain relief, this block reduces the incidence of drowsiness, nausea and vomiting after the operation.

There are several potential side effects related to nerve blocks for shoulder surgery. Mostly these are *minor* and *short-lasting*:

- A lump or bruise at the injection site.
- Persistent numbness or tingling in a small area of the arm, which may last a day or so.
- A hoarse voice or mild drooping of the eye on the side of the operation, which may last for a few hours.

There are also some more serious risks which are exceptionally rare but may include:

- Abnormal heart rhythms
- Seizures
- Permanent nerve damage

Pain relief:

If a nerve block has not been performed, local anaesthetic will be injected by the surgeon during your procedure.

Because shoulder surgery can often be quite painful, I will prescribe a number of medications to help manage your pain.

These medications include opioid analgesics (e.g. Oxycodone & Tapentadol); anti-inflammatories (e.g. Panadol Osteo, Meloxicam) & Pregabalin (Lyrica).

If opioid analgesics are required, there is a risk of constipation in many patients. *Use of oral laxatives (e.g. Coloxyl with Senna) is advised.*

After the operation:

You will usually be discharged with a combination of opioid analgesics (Oxycodone) & anti-inflammatories (e.g. Panadol Osteo & Meloxicam)

If given a nerve block, it will wear off 8 - 24 hours after the operation and around this time you will regain sensation and movement of the shoulder. You will also start experiencing pain around this time and it is important that you take analgesic tablets as directed.