

Shoulder Balloon Spacer

Post-Op Instructions & Therapy Protocol

Precautions: During the first 3 months post-operation, the patient is counseled to avoid quick sudden movements, repetitive movements, lifting of any weight and any activity that requires force or power. Driving is not recommended until the patient can safely hold the steering wheel with both hands and operate the vehicle safely.

Info: The patient population indicated for an InSpace Balloon subacromial spacer has an unreparable torn rotator cuff. They must have an intact subscapularis and minimal glenohumeral joint arthritis. The balloon acts as a spacer to keep the humeral head from migrating superior with active elevation and centered with the glenoid. This helps patients recover by improving the shoulder biomechanics and reducing pain levels. The balloon is biodegradable and is absorbed by the body after about 3 months. Some patients will temporarily experience a decline in function and pain levels at about this time. Most patients will then improve again.

0-4 weeks:

- The operated arm is placed in a sling during the day and night for approximately 4 weeks. Afterwards, the sling/immobilizer may be removed unless needed for comfort.
- Therapy begins immediately post-op with passive and active exercises. Remove sling for exercises.
- Exercises include passive and active assisted scapula, cervical spine, elbow, forearm, wrist, and hand exercises with grip.
- Forward flexion and abduction are limited to no more than 60° (less if painful).
- Pendulum (Codman) exercises.
- Isometrics: internal rotation (IR), external rotation (ER), deltoid.

4-6 weeks:

- Continue passive and active exercises to achieve functional ROM with slow steady stretching (without pain). Begin lightly and increase over time.
- Progress AROM flexion in supine and then as tolerated standing for a goal of overhead motion.
- Activities may be completed independently and/or with therapy assistance.
- Strengthening begins lightly and increases over time with no power activity for at least 3 months post-op.

- Progress resistance bands for shoulder extension, scapular retraction, and lower trapezius exercise. IR/ER with arm at side.

6-12 weeks

- Initiate side lying light dumbbell.
- Continue to gradually regain preoperative ROM or at least make steady ROM and strength gains on a weekly basis until return to normal activities of daily living.
- It is expected to feel temporary discomfort or transient increase in shoulder pain at this stage.

12+ weeks

- Rehabilitation by continue through 6 months until return to normal activity level.

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