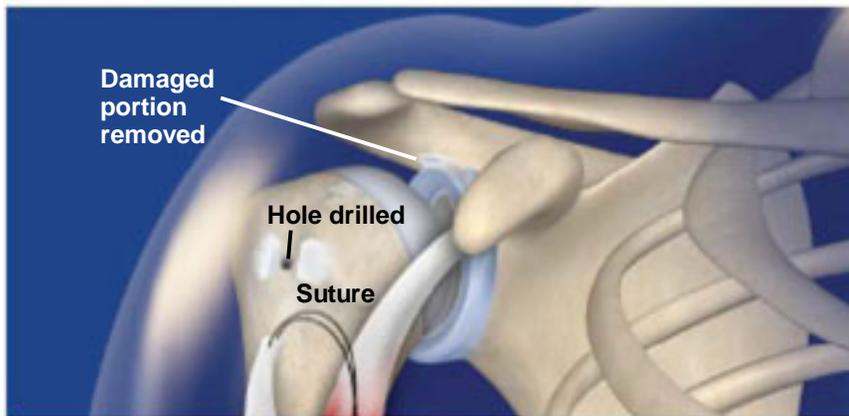
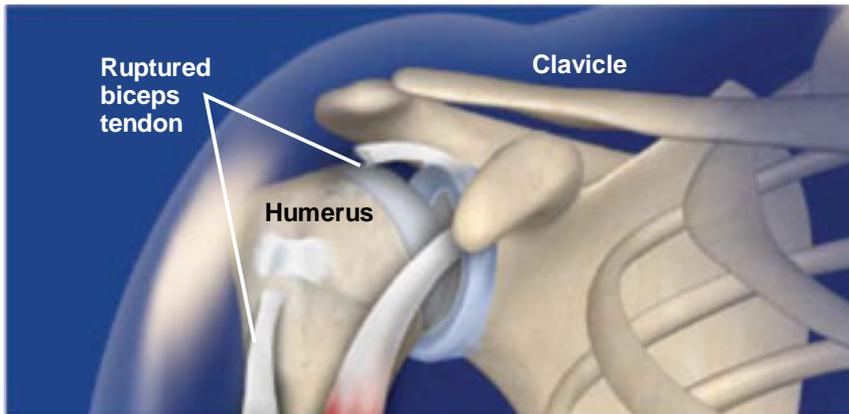


BICEPS TENODESIS



Overview

This minimally-invasive surgical procedure is used to repair a rupture or partial tear of the biceps tendon in the shoulder, or to treat chronic tendinitis. In this procedure, the Long Head of Biceps (LHB) tendon is reattached to the top of the humerus, relieving pain, discomfort and restoring stability and strength to the arm.

Preparation

The patient is positioned so that the front of the shoulder is clearly visible to the surgeon, and the area is cleaned and sterilized. Local anesthesia is administered to numb the injection site and a sedative is provided to relax the patient. General anesthesia may sometimes be used.

Accessing the Shoulder

The surgeon creates two small incisions on the shoulder and inserts an arthroscopic camera and arthroscopic scissors. The camera allows the surgeon to view the procedure on a monitor.

Releasing the Tendon

Arthroscopic scissors are used to remove the damaged portion of LHB tendon at the scapula. A small incision is made in the front of the shoulder and the top of the tendon is retrieved through the hole. Any damaged portions of the tendon are removed.

Repairing the Tendon

The tendon is placed back into the shoulder joint and the top is positioned over the top of the humerus. A small hole is drilled into the humerus and the end of the LHB tendon is placed into the hole. A surgical fixation screw is inserted into the hole over the tendon to hold the tendon in place.

End of Procedure

The incisions are closed with sutures or surgical staples. The shoulder is bandaged. The patient will be given pain relievers and patients should be able to leave the hospital within a day. Physical therapy will be required.