



Subacromial Decompression Surgery

Information for Patients

What is subacromial depression?

Subacromial impingement is a common condition affecting the shoulder. Treatments such as pain killers, rest, exercises and injections are usually very successful at managing this condition. Sometimes symptoms persist and surgical treatment is required to ease pain and allow a return to function.

How does surgery help?

The purpose of the surgery is to increase the size of the sub acromial space. This is the space between the ball of the shoulder joint and the acromion or roof of the shoulder as seen in the picture on the right.

To achieve this the surgeon will shave the underside of acromion and remove the sub acromial bursa – a fluid filled sac.

Sometimes, if there is wear of the joint between the collar bone and acromion, known as the acromioclavicular joint, the surgeon may also remove the end of the collar bone to further improve the shoulder pain.

The surgical procedure

Where does it take place

The procedure can take place at various sites across the region. If you are medically well you will be able to choose at the time of booking where you are seen. If there are other medical conditions to be considered your referrer may guide you on where it may be more appropriate for you to be seen.

an anaesthetist to discuss the anaesthetic. The consultant will discuss the procedure with you including risks and benefits of the operation. You will have the opportunity to ask any questions you have about the surgery and recovery. Depending on where you are seen your pre operation checks may take place at your first consultation.

Service provided by

Sirona
care & health

Preparation for surgery

You will first be seen in an outpatient clinic by the surgical team to assess your suitability for surgery. If listed for surgery you will be seen in a pre-operative assessment clinic by a consultant surgeon two-six weeks prior to surgery.

The surgeon will be able to check you are safe for surgery by discussing your medical history. You may also need to meet with

How long will it take?

This is a day case procedure so there is no need for an overnight stay in most cases. You will need to not eat or drink for six hours prior to the procedure.

The surgery will always be performed under a general anaesthetic which will be administered and monitored during the procedure by an anaesthetist.

Surgical Outcomes

Predicting the outcome of any surgery can be very difficult since the outcome will be dependent on many variables e.g duration of symptoms, severity of symptoms, other medical or orthopaedic complaints. In the case of sub acromial decompression it also depends on shoulder mechanics (how the shoulder is moving) which can be influenced by core strength, spinal posture, and shoulder muscle and tendon integrity. Despite this

it is estimated that 75-80% of patients that undergo a sub acromial decompression are satisfied with the outcome and that as many as 70% of patients have returned to normal function by 12 weeks after surgery.

Surgical Risks

While this surgery is considered a relatively safe procedure and adverse effects are rare, all surgical procedures inherently carry some risk. A general anaesthetic will be used and there is a small chance you may react badly to the medicines used. If you have had an adverse reaction to general anaesthetic in the past you must inform your surgeon.

The greatest risk from this surgery is ongoing pain although this is rare. Other risks include infection and difficulty in wound healing. There is a very small risk of tendon injury.

After Surgery

When to go home

Once you have woken from the anaesthetic the ward staff will assess and advise when it is safe to go home, normally this will be on the same day as surgery.

You will be provided with a sling to wear but this is for comfort only and doesn't need to be worn. You may find you need it on and off for a few days but often it can be discarded sooner than this.

Exercises to do at home

You will be shown some exercises by a physiotherapist and provided with some written guidance on how to complete these. It is important that you complete these exercises in order to regain shoulder movement as soon as possible even though these are likely to be uncomfortable to do for the first few weeks after your operation.

Taking care of your wound

You may have some stitches in the shoulder from the surgery where there will be two or three small wounds which will be dressed. If the stitches need removing the ward staff will advise you when and where this needs to be done.

You should keep the wound clean and dry until the wound have closed which can take up to two weeks. If the wound becomes red hot or swollen, or you feel unwell in yourself and have a temperature, see your GP.

Physiotherapy

You will be seen in outpatient physiotherapy approximately two weeks after your surgery. The physiotherapist will assess your shoulder movements and may suggest additional exercise or attendance at an exercise class. You will be seen by your surgeon or one of their team at approximately six weeks after your surgery for a review of progress.

Guidelines for recovery

There are no strict limitations after this surgery and return to full function is often down to individual factors. Below are some guidelines on times for recovery but these are a guide only:

- **Driving:** One week
- **Light work:** Two weeks
- **Heavy manual work:** Six weeks
- **Vigorous exercise:** 12 weeks

Normally you will have gained full movement of the shoulder by six weeks and full power of the shoulder by 12 weeks by following the exercises provided in physiotherapy. The pain from the surgery will gradually settle but can last as long as six months after surgery.

Other formats

We want you and the people who help you to understand what we send. If you need help with this letter or leaflet, please tell us.

We can help with larger print, audio (a message to listen to), Easy read, British Sign Language or this information in another language.



You can phone us on 0300 125 6789 email us at sirona.accessiblecomms@nhs.net

Please scan the QR code to listen to an audio version of this statement.

Date of creation: 06/2026 Date for review: 06/2028 URN: 0218

Siona care & health CIC, Badminton Rd Office, 2nd Floor, Badminton Rd,
Yate, BS37 5AF



/SironaCIC



/ SironaCIC



/sirona-care-&-health

