KEY PROCEDURES

ARTHROSCOPIC SUBACROMIAL DECOMPRESSION AND ACROMIOPLASTY

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Published outcomes of this procedure can be found at: *Am J Sports Med.* 2012 Feb;40(2): 352-8, *J Bone Joint Surg Am.* 2011 Nov 2;93(21):1953-60, *J Bone Joint Surg Am.* 1993 Mar;75(3):409-24.

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Abstract

rthroscopic subacromial decompression with acromioplasty is among the most commonly performed arthroscopic shoulder procedures and is an important aspect of any orthopaedic surgeon's armamentarium. This procedure is indicated for refractory subacromial bursitis and subacromial impingement. It is also a routine portion of rotator cuff repair exposure. The procedure aims to remove the subacromial bursa, which can serve as a pain generator, as well as any osteophytes on the undersurface of the acromion, which can lead to impingement and, in some circumstances, bursal-sided rotator cuff tears. Multiple randomized clinical trials have demonstrated no benefit for this procedure as an initial treatment in patients with subacromial bursitis^{2,7,8}, and thus this procedure is indicated only for patients with refractory subacromial bursitis. The steps of this procedure include (1) placement of the arthroscope in the subacromial space and establishment of a lateral working portal, (2) performance of a thorough subacromial bursectomy, (3) achievement of hemostasis and subperiosteal exposure of the undersurface of the acromion, and (4) smoothing of the undersurface of the acromion and removal of any anterolateral osteophytes. Outcomes after this procedure have shown significant increases in UCLA (University of California at Los Angeles), Constant, visual analog pain scale, and Simple Shoulder Test scores over the preoperative status^{2,5,10,11}. Complications, while infrequent, are mostly related to overresection or underresection of the acromion.

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