

**PEARLS** Practical Evidence About Real Life Situations

## Surgery for rotator cuff disease is no more effective than active nonsurgical treatment

Clinical question	How effective is surgery for rotator cuff disease?
Bottom line	Comparing active non-surgical treatment (physiotherapy or exercise programmes) with surgery for rotator cuff disease showed no significant differences in outcomes such as pain, function and participant evaluation of success. There were also no significant differences in outcomes between arthroscopic and subacromial decompression, although four trials reported earlier recovery with arthroscopic decompression.
Caveat	There was insufficient evidence to suggest whether surgery made a difference to other outcomes, such as the ability to use the shoulder normally, quality of life, range of shoulder motion, strength, the likelihood of recurrence, time taken to return to work or sports, and patient satisfaction.
Context	Rotator cuff disease is the most common cause of shoulder pain seen by physicians. Shoulder pain is the third most common musculoskeletal reason for seeking medical care after back and neck pain, <sup>1</sup> and accounts for 1.2% of all general practice encounters in Australia. <sup>2</sup>
Cochrane Systematic Review	Coghlan JA et al. Surgery for rotator cuff disease. Cochrane Reviews 2008, Issue 1. Art. No.: CD005619.DOI:10.1002/14651858.CD005619.pub2. This review contains 14 studies involving 829 participants.
Pearls No. 75 June 2008, written by Brian R McAvoy	

Bott SDM et al. Annals of Rheumatic Disease 2005;64:118-123.
Bridges-Webb C et al. Medical Journal of Australia 1992;Supplement 157:51-556.

PEARLS are succinct summaries of Cochrane Systematic Reviews for primary care practitioners. They are funded by the New Zealand Guidelines Group.

PEARLS provide guidance on whether a treatment is effective or ineffective. PEARLS are prepared as an educational resource and do not replace clinician judgement in the management of individual cases.

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