

# Acromioclavicular Joint Cyst, A Rare Complication of Rotator Cuff Pathology

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Karim Fahmy, DO; Richard Thai, DO; Jake Gooing, OMS-IV; David Majors, MD

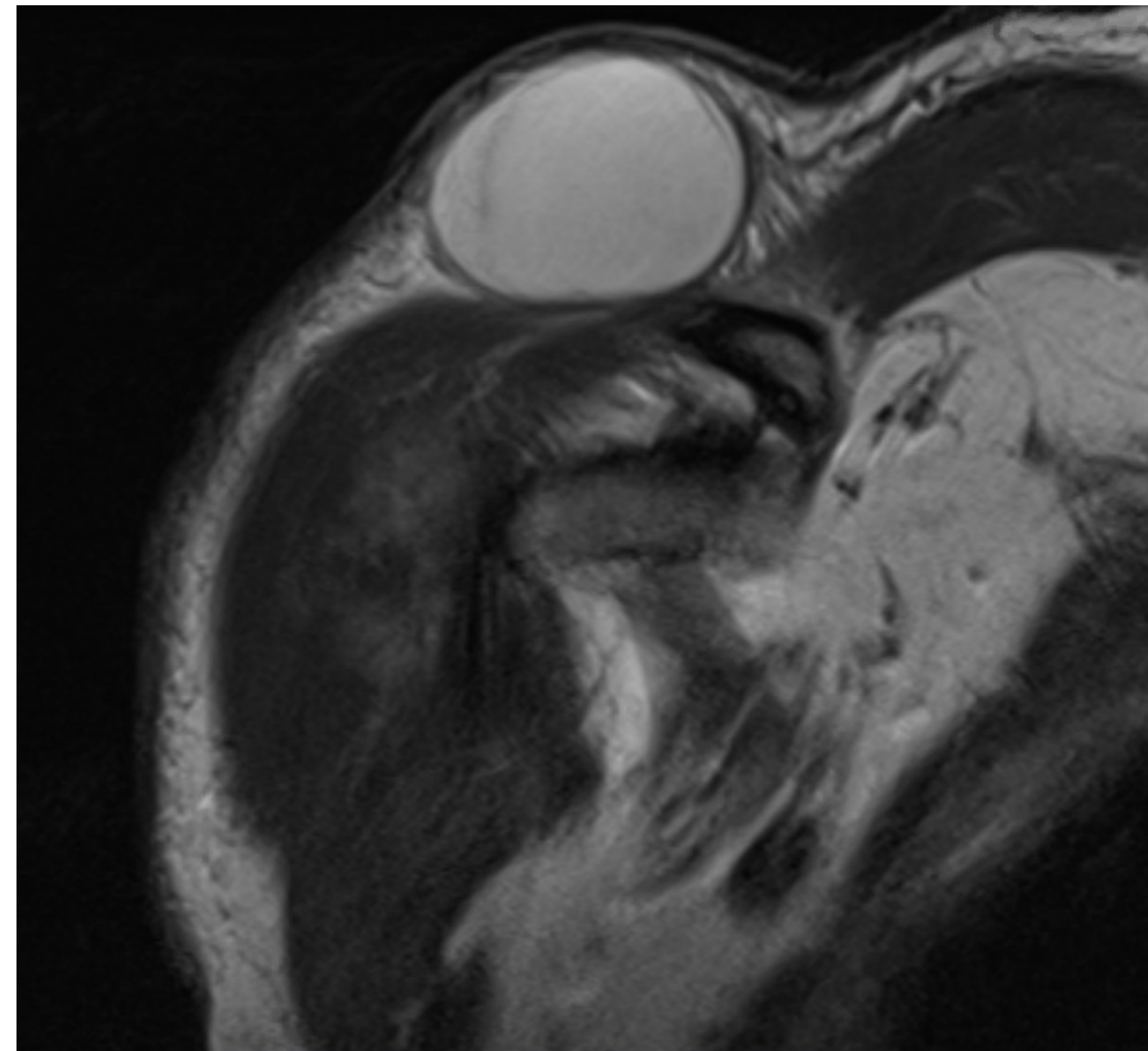
UC Irvine Health Department of Physical Medicine and Rehabilitation

## CASE DESCRIPTION

A 77-year-old male was referred to the general musculoskeletal clinic for aspiration of a right shoulder “lump” after 3 months of progressive pain worse with overhead activity. Physical exam revealed a 3cm raised, non-erythematous mass over the acromioclavicular (AC) joint, limited shoulder range of motion in flexion/abduction, and positive impingement signs. An MRI showed full thickness tears of the supraspinatus and infraspinatus, AC joint cyst measuring 4.4 x 3.8 x 2.8cm, and severe degenerative changes of the glenohumeral and AC joints. Given the severity of shoulder pathology, the patient was referred to orthopedic surgery and underwent reverse total shoulder arthroplasty, followed by an outpatient rehabilitation program.

## DISCUSSION

AC joint cysts are rare sequelae of rotator cuff pathology, causing symptoms such as pain and limited range of motion. There are two types of AC joint cysts. Type 1 refers to isolated AC joint pathology with no communication to the glenohumeral joint, while Type 2 is secondary to rotator cuff pathology. Discerning between the two types of AC joint cysts is important when identifying treatment options. For Type 1 AC joint cysts, treatment involves distal clavicle excision and subacromial bursectomy. Type 2 AC joint cyst are treated by addressing the underlying rotator cuff pathology. Surgeries include arthroscopy with debridement and rotator cuff repair, shoulder arthroplasty, or arthrodesis. Aspiration and drainage of the cyst is generally not recommended as there is a high rate of recurrence/infection and does not treat the underlying issue. After definitive surgery, cyst recurrence is low.



## CONCLUSION

Acromioclavicular joint cysts are a rare complication of rotator cuff pathology. There are two types of AC joint cysts and management varies depending on the type of cyst. To prevent recurrence of cysts and avoid complications, surgery is the definitive treatment option.

## REFERENCES

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