

Little Aston OASIS

Orthopaedic and Sports Injuries Services

Key Hole Surgery Upper limb Sports related Injuries

Joint Replacement



Information

Orthopaedic and Sports Injuries Services "OASIS"

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Reverse Shoulder

The shoulder is a ball and socket joint. The ball portion of the joint is called the humeral head, and is part of the humerus (upper arm bone). The socket portion is called the glenoid, and is part of the scapula (shoulder blade). The humeral head (ball) fits into the glenoid (socket) and the two bones rub together as the shoulder moves.





In a healthy shoulder joint, the surfaces of these bones where the ball and socket rub together are very smooth and covered with a tough protective tissue called cartilage. Arthritis causes damage to the bone surfaces and cartilage. These damaged surfaces eventually become painful as they rub together.

The Rotator Cuff tears first and it looses the centralising effect and causes unbalanced forces so causes wear.

The reverse shoulder is a shoulder joint replacement that is implanted into a person's body when their own shoulder no longer functions properly or causes pain.

This procedure is designed for people who have exhausted all other means of repair. When a person gets to this stage of shoulder weakness and pain, changes must be made in the actual mechanics, or workings, of the shoulder.

In the healthy shoulder, the upper arm bone (humerus) ends in a ball shape. This fits into a socket formed by the shoulder blade (scapula). Together this ball and socket form the shoulder.

With the Reverse Shoulder Prosthesis, the anatomy, or structure, of the healthy shoulder is reversed. The implant is designed so that the ball portion is attached to the scapula and the socket is placed at the upper end of the humerus.

The Reverse Shoulder System consists of five basic parts, or components. The upper portion of the humeral stem is called the epiphysis and it lies even with the top of the humerus. It is made of metal (titanium, cobalt chrome, stainless steel). The bottom portion of the humeral stem is called the diaphysis and it is inserted down into the center of the humerus.

The epiphysis holds the third component, a polyethylene cup that forms the socket part of the new joint.

On the scapular side, the fourth component, the metaglene, is a specially coated metal plate that is firmly attached to the scapula with screws.

The fifth component is the ball portion of the joint called the glenosphere. It is a half-globe shaped metal piece that fits onto the metaglene. The glenosphere fits inside the polyethylene cup on the humeral side to form a new shoulder joint. Both the glenosphere and the polyethylene cup come in different sizes so the implant may be tailored to different body sizes.

Below is a list of things you may want to bring with you to the hospital in preparation for your surgery. Talk with your doctor as he/she may have additional information about preparing for

your hospital stay.

The Reverse Shoulder Prosthesis is mainly used for older patients with rotator cuff tear arthropathy (end stage cuff tear arthropathy) a medical condition in which the rotator cuff muscles (the muscles around the shoulder joint) have degenerated, or weakened to a point where they can no longer hold the shoulder joint intact or allow it to function normally in conjunction with arthritis.

In many cases, the causes of the weakness may be arthritis, a previous shoulder injury such as a shoulder fracture, rotator cuff tear and/or failed previous shoulder surgeries.

This procedure can also be used in revision surgery, for failed shoulder replacement and shoulder fractures. Its also commonly used for patients who dont have a rotator cuff (pseudoparalytic shoulder). Older people who have significant pain and little to no movement in their shoulder are the best candidates. It is ideal for patients with chronic, longstanding rotator cuff tears with arthritis. This procedure is not recommended for people who have infections, deficiencies in the scapula, or for patients without functioning deltoid muscles. It is also not recommended for younger patients.

Patients see a drastic difference in their range of mobility, and their ability to perform daily activities, such as eating, drinking, combing their hair, etc.

Patients who have had the procedure go from having severe shoulder dysfunction to 90 to 100 degrees full elevation. it is a miraculous change of lifestyle.

- Your personal belongings should be left in the car until after surgery. Tell your family that your room will be assigned when you are in surgery or in recovery, at which point they can bring your personal items to your room.
- Personal grooming items that you may want to pack include a toothbrush, toothpaste, hairbrush, eyeglasses/contacts, comb, deodorant, shaving cream/electric razor, shampoo, lotion, undergarments, and a robe.
- Bring slippers or flat rubber-soled shoes for walking in the hallways.
- Bring loose fitting clothing for your trip home.

- Bring any medications you are currently taking. You should also write down your medication information to be given to the hospital staff. Be sure to include the name, strength, and how often you take the medications. Please communicate any allergies you might have to your doctors and the nursing staff.
- Leave jewellery, credit cards, car and house keys, cheque books, and items of personal value at home. Bring only enough pocket money for items such as newspapers, magazines, etc.

This procedure usually involves an anaesthetic <u>my anaesthetist</u> is an expert in regional blocks and you can have a choice of being awake while the surgery is done.

The patient is first taken into the operating room and positioned on a special operating table as though lounging in a beach chair. The arm is placed on a board that will allow the surgeon to move it up or down as necessary during the surgery. Anesthesia is given and, when it has taken effect, the skin around the shoulder and upper arm is thoroughly scrubbed and sterilized with an antiseptic liquid.

An incision about six inches long is then made over the shoulder joint. The incision is gradually made deeper through muscle and other tissue until the bones of the shoulder joint are exposed.



The shoulder joint is then replaced With a reverse Shoulder system.

I use the <u>Lima reverse with excellent</u> results.







A sterile bandage will be placed over the wound, and you will be sent to the recovery room where you will be carefully monitored. As the anesthesia wears off you will slowly regain consciousness. A nurse will be with you, and may encourage you to cough or breathe deeply to help clear our lungs. Your arm will be in a sling or brace, and it may be wrapped in an ice pack to help control pain and swelling. You will also be given pain medication. When you are fully conscious, you will be taken back to your hospital room.

When you are back in your hospital room, you will begin a gentle rehabilitation program to help relax the muscles around your new shoulder. On the day of surgery you may be encouraged to get out of bed and take a few steps. You will continue to receive pain medication as needed, and your bandage will be removed about two days after surgery.

Depending on your specific situation, you will probably remain in the hospital from one to three days. Your shoulder area may be warm and tender for several weeks. Before you are dismissed

from the hospital, your physical therapist will show you how to perform the rehabilitation exercises that are important for your recover.

Successful joint replacement surgery may relieve your pain and stiffness, and may allow you to resume some of your normal daily activities as instructed by your doctor. But even after you have fully recovered from your surgery, you may still have some restrictions. Normal daily activities for shoulder replacement patients do not include contact sports "jamming" activities such as hammering, repetitive heavy lifting, or activities that put excessive strain on your shoulder. Although your artificial joint can be replaced, a second implant is seldom as successful as the first.

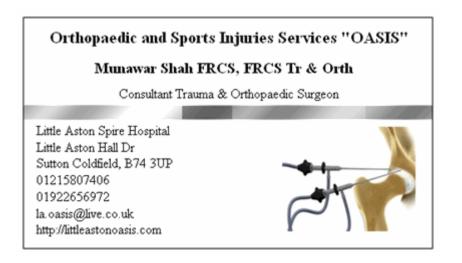
Talk with your doctor about the following points, and how they might affect the longevity and success of your shoulder replacement:

- Avoiding repetitive heavy lifting
- Avoiding "jamming" activities such as hammering
- Staying healthy and active
- Avoiding "impact loading" sports such as boxing
- Consulting your surgeon before beginning any new sport or activity, to discuss what type and intensity of sport or activity is appropriate for you
- Thinking before you move
- Not lifting or pushing heavy objects.

M Shah Rehab Reverse Shoulder.pdf



If you are interested in making an appointment to discuss a treatment, please click here to contact us, or telephone 01215807406



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