

# Shoulder Replacement

## Why do I need a shoulder replacement

The shoulder is a ball and socket joint with a large range of movement. The joint sometimes needs replacing. This is usually when severe arthritis affects the joint surfaces and the shoulder becomes painful and difficult to move.



The main reason for this operation is to reduce the pain in your shoulder. The operation replaces the damaged surface of the ball of the joint (see pictures) This shoulder replacement is called "the Copeland Shoulder". This is a resurfacing shoulder replacement. Occasionally a different type of replacement may be used (Stemmed implant or Reverse Shoulder prosthesis). The doctors will discuss your individual surgery.

The reverse shoulder is done when you have lost all the rotator cuff muscle in the shoulder as happens with degeneration of tendons with age.

## What happens after the operation?

You will usually be in hospital for about 2-5 days after your operation. Following your surgery you will be in a sling. This is for comfort only and you may take it off as you wish.

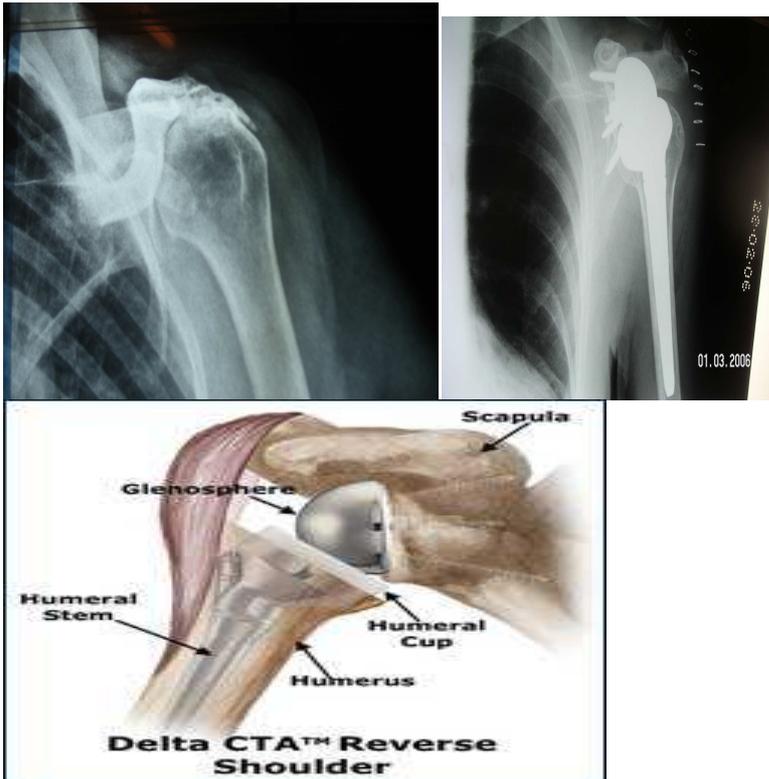


Figure: Severe damage to rotator cuff with arthritis treated with Reverse shoulder arthroplasty

A physiotherapist will see you in hospital to give you advice about using your arm and exercises. Outpatient physiotherapy will be arranged when you are discharged.

Your arm will be painful at first and in the first three to four weeks you will be quite one handed which will significantly affect your daily activities. As your pain improves so will the amount you can use your arm.

Driving and most light activities are usually possible four to six weeks after the surgery. However the strength in your arm will take longer to improve, and will be dependent on the amount of pain and stiffness you had prior to the surgery. A doctor or physiotherapist will discuss this with you.

Stemmed shoulder replacement



## What are the complications

As with all surgery there is a risk of some complications. These are rare, but you should be aware of them before your operation. They include:

Complications relating to the anaesthetic.

Infection , Unwanted prolonged pain and/or stiffness, dislocation

Damage to the nerves or blood vessels around the shoulder and rarely a need to redo the surgery.

If you require further information please discuss with the doctors either in clinic or on admission.

## Guidelines for patients following Total Shoulder Replacement



**Introduction** Following your operation you will have a scar approximately 3 inches long on the front of your shoulder.

Your arm will be supported in a sling and a physiotherapist will teach you how to take it on and off to do your exercises. You will be in hospital for about one week.

## General guidelines

**Pain:** A nerve block may be used during the operation which means that immediately after the operation the shoulder and arm may feel numb. This may last a few hours. After this your shoulder will be painful and this may last a few weeks. You will be given painkillers to help this whilst in hospital. These should be continued after you are discharged home.

### Wearing a Sling:

You will return from theatre wearing a sling. This is used for the first 3 weeks following your operation. It is important that you remove the sling to exercise. You can stop wearing the sling as soon as you feel comfortable.

### The Wound:

Keep the wound dry until it is healed. This normally takes 10 to 14 days. Your stitch is dissolvable and needs only to be trimmed at your clinic visit.

### Driving:

This is usually possible after about three to six weeks, but will be dependant on your recovery.

### Returning to work:

This is dependent upon your occupation. Light activities which involve using your arm in front of your body may be resumed after about three weeks, but if your job involves heavy lifting you will be off work for up to three months.

### Leisure activities:

Gentle swimming and exercises in water can begin at 4 to 6 weeks Golf 6 weeks.

### Follow up appointments:

You will have an appointment to see the doctor/specialist physiotherapist three weeks after your operation.

### Progress:

This is variable and dependant on the amount of movement and the strength of your muscles prior to surgery. Following discharge your pain will slowly decrease

and you will become more confident. You will be able to use your arm in front of you for light activities. After six weeks your strength will start to improve and will take upto 6 to 9 months.

## **Exercises:**

You will start exercises on the first day after your operation. A physiotherapist will see you to teach you these and progress them. Out patient physiotherapy will be arranged for when you are discharged.