

Total Shoulder Replacement

What is Arthritis?

Arthritis refers to a group of conditions that **damage** one or more joints.

Your surgeon has recommended a **total shoulder replacement** to manage your condition. However, the decision to proceed with surgery is entirely **yours**.

This document provides essential information on **the benefits**, **risks**, **and alternatives** to help you make an **informed choice**.

If you have **unanswered questions**, consult your **surgeon or healthcare team**. Once all concerns are addressed, and you decide to proceed, you will be asked to **sign an informed consent form**.

This step finalizes your decision, but you can change your mind at any point.

How Does Arthritis Develop?

The most common type of arthritis is **osteoarthritis**, which results from **gradual wear and tear** of the joint. While it may develop due to **a previous injury or condition**, it often occurs **without a known cause**.

Other forms of arthritis, such as **rheumatoid arthritis**, involve **chronic inflammation** that can progressively damage the joint.

Over time, arthritis **erodes the cartilage** covering the joint surface, exposing and **damaging the underlying bone**. This leads to **pain, stiffness, and reduced mobility**, affecting daily activities.

What Are the Benefits of Surgery?

- Pain relief
- Improved shoulder mobility
- Enhanced ability to perform daily activities

Are There Alternatives to Surgery?

- **Pain management:** Simple painkillers like **paracetamol** and **anti-inflammatory medications** (e.g., ibuprofen) may help control symptoms.
- **Exercise:** Regular **moderate exercise** can help reduce stiffness and maintain joint function.
- Steroid Injections: A steroid injection into the shoulder joint may relieve pain and stiffness for several months, but repeated injections can have side effects.
 - Avoid steroid injections within **two weeks of a vaccination** as they may **reduce antibody response**.
- Lifestyle modifications: Adjusting daily activities to reduce strain on the shoulder can also help manage symptoms.

However, if arthritis **progresses**, these measures become **less effective**, and a **shoulder replacement** may be the best option.

What Happens If I Do Not Have Surgery?

- Arthritis in the shoulder **usually worsens over time**, though the progression can vary.
- While arthritis itself **is not life-threatening**, it can be **debilitating** and significantly affect quality of life.
- Symptoms may fluctuate, often worsening in **cold weather** or with increased **strain on the joint**.

Your surgeon will discuss your specific case and whether surgery is the most suitable next step for you.



A total shoulder replacement

What Does the Operation Involve?

The healthcare team will perform a series of **checks** to ensure you are undergoing the **correct procedure on the correct side**. You can assist by confirming your **name and procedure** with your **surgeon and healthcare team**.

Different **anaesthetic options** are available, and your **anaesthetist** will discuss the best choice for you. You may also receive a **local anaesthetic injection** to help manage pain after surgery. To minimize the risk of **infection**, you may be given **antibiotics** during the procedure.

The surgery typically lasts 1 to 2 hours.

Your surgeon will make an incision on the **front of your shoulder**, remove the **damaged ball (humeral head)**, and assess the **socket on your shoulder blade**. The **ball** is replaced with a **metal implant**, and in some cases, the **socket is also replaced** with a **plastic component**.

There are various types of **shoulder replacements**, and your **surgeon will discuss the most suitable option** for you. The implant is secured to the bone using either a **special coating** or **acrylic cement**.

Your surgeon will close the incision with stitches or clips.

What Should I Do About My Medication?

Inform your healthcare team about **all medications** you take and follow their advice. This includes:

- Blood-thinning medications
- Herbal and complementary remedies
- Dietary supplements
- Over-the-counter medications

How Can I Prepare for the Operation?

- Stop smoking to lower the risk of complications and improve long-term recovery.
- Maintain a healthy weight, as excess weight increases the risk of complications.
- Engage in regular exercise to strengthen your shoulder and overall health. Consult your healthcare team or GP before starting an exercise routine.

To **minimize the risk of infection**, take the following precautions:

- Avoid shaving or waxing the surgical area in the week before surgery.
- Take a bath or shower the day before or on the day of the operation.
- Keep warm before and after surgery, and inform the healthcare team if you feel cold.
- If diabetic, keep blood sugar levels controlled before and after surgery.

Speak to your **healthcare team** about any **recommended vaccinations** to reduce the risk of **serious infections** during recovery. When visiting the hospital, practice **good hygiene** and wear a **face covering** if advised.

What Complications Can Occur?

The healthcare team will take steps to reduce the risk of complications.

Risk percentages are based on **studies of previous patients**. Your **doctor can assess whether your individual risk** is higher or lower. Factors that **increase risk** include:

- Older age
- Obesity
- Smoking
- Chronic conditions (e.g., diabetes, heart disease, lung disease)

While rare, some complications can be serious or even life-threatening.

If you have any **concerns or uncertainties**, ask your **doctor** for clarification.

Your anaesthetist will also discuss the risks associated with anaesthesia.

General Complications of Any Operation

• **Bleeding** during or after surgery. The need for a **blood transfusion is rare**.

- Infection at the surgical site. You can typically shower after two days, but confirm with your healthcare team. Keep your wound dry and covered. Inform the team if you develop a high temperature, pus, or increased redness, soreness, or pain at the site. Most infections resolve with antibiotics, but some may require special dressings or additional surgery. Do not take antibiotics unless prescribed.
- Allergic reactions to surgical equipment, materials, or medication. The healthcare team is trained to detect and manage any allergic reactions. Inform your doctor about any known allergies or past reactions to medication, tests, or dressings.
- Venous Thromboembolism (VTE) A blood clot in your leg (deep vein thrombosis DVT) or lung (pulmonary embolism PE). DVT may cause pain, swelling, or redness in the leg, or prominent surface veins. The healthcare team will assess your risk and help prevent clots by encouraging movement, providing medication, or prescribing compression stockings. A pulmonary embolism occurs when a clot travels to the lungs, potentially causing breathlessness, chest or upper back pain, or coughing up blood. Seek emergency medical help if you experience these symptoms.
- Chest infection. You may need antibiotics and physiotherapy. The risk decreases if you quit smoking and are free from COVID-19 symptoms for at least 7 weeks before surgery.
- Heart attack, where part of the heart muscle dies, which can be fatal.
- Stroke, a loss of brain function due to reduced blood supply, which may also be fatal.

Specific Complications of Shoulder Replacement Surgery

- Nerve damage around the shoulder, leading to weakness, numbness, or pain in the shoulder or arm (risk: less than 1 in 100). This often improves but may be permanent.
- Infection, which can cause the shoulder replacement to loosen or fail (risk: less than 1 in 100). Additional surgery may be required to manage the infection.
- Severe pain, stiffness, and loss of arm and hand function (complex regional pain syndrome CRPS). The exact cause is unknown. Physiotherapy and pain management may be needed, and recovery can take months or years. In some cases, pain and stiffness may be permanent.
- Loosening of the implant over time without infection, requiring revision surgery (risk: 1 in 10 over 10 years).
- Rotator cuff tears The rotator cuff consists of four muscles and tendons attaching the arm to the shoulder blade. Surgical repair may be necessary if torn.
- Dislocation of the shoulder replacement (risk: less than 2 in 100 in the first 5 years). Repeat dislocations may require additional surgery.
- Stiff shoulder While movement is usually better than before surgery, it may not fully return to normal. The shoulder may never feel like a completely natural joint.
- Revision surgery Shoulder replacements wear out over time, depending on activity levels. 8 to 9 out of 10 shoulder replacements last at least 15 years before requiring revision.

Consequences of Shoulder Replacement Surgery

- **Pain** The healthcare team will provide **pain relief medication**, which should be **taken as prescribed** to **facilitate movement and recovery**.
- Scarring The incision is made at the front of the shoulder. Although scarring is usually neat, it may still be visible.

Recovery Timeline

In Hospital

After surgery, you will be transferred to the **recovery area** before moving to the **ward**. An **X-ray** will typically be performed to ensure the **correct positioning** of the shoulder replacement.

A physiotherapist will assist you in starting shoulder movements, usually within 1 to 2 days, and will guide you on how to care for your new shoulder.

Keep your wound dry for the first week, using a waterproof dressing while bathing or showering.

The **healthcare team** will inform you if **stitches or clips** need to be removed or **dressings** need to be changed.

You should be able to **return home within 2 to 3 days**, but in some cases, your doctor may recommend a **longer hospital stay**.

If you experience **any concerns** during recovery, **in hospital or at home**, contact the **healthcare team** for guidance.

Returning to Normal Activities

You will need to **wear a sling** for **up to 6 weeks** to minimize strain on your **shoulder joint**. Your **healthcare team** will advise when it is **safe to resume normal activities**.

To prevent complications, follow the recommended **posture and movement precautions** for your **new shoulder**.

Regular **exercise** is essential for regaining mobility. **Consult the healthcare team or your GP** before starting any **exercise regimen**.

Do not **drive or ride a bike** until you can safely **control your vehicle**, including in an **emergency**. Always **check with your healthcare provider and insurance policy** before resuming driving.

Long-Term Outlook

Most people experience **significant pain relief**, **improved mobility**, **and a good recovery** following surgery.

Adhering to **physiotherapy exercises** is crucial for maintaining **shoulder strength and function**. An **artificial shoulder** will not feel exactly like a **natural shoulder**, so **long-term care** is important. Over time, **shoulder replacements can wear out**, especially with **high activity levels**.

Approximately 8 to 9 in 10 shoulder replacements last at least 15 years, but a revision surgery may eventually be required.

Summary

Severe shoulder arthritis can lead to pain, stiffness, and loss of function. A shoulder replacement can significantly reduce pain and improve movement.

Although **surgery is generally safe and effective**, complications are possible. Understanding the **risks and benefits** allows you to make an **informed decision**.

This document provides **essential information** but does not replace **personalized medical advice**. For **more details** on your specific risks and alternative treatments, consult your **surgeon or doctor**.

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