

Shoulder Replacement

Introduction

Over the last few years, shoulder injuries have become more common because people are exercising more frequently.

In cases of severe degenerative changes of the shoulder, where the shoulder continues to get worse, your doctor may consider shoulder replacement.

If your doctor recommends shoulder replacement surgery, the decision whether or not to have surgery is yours. This reference summary will help you better understand the benefits and risks of this surgery.

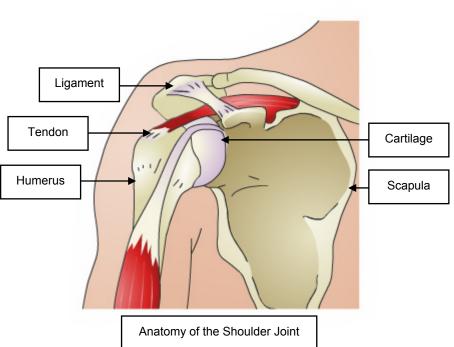
Anatomy

The shoulder joint joins the upper body to the arm. The bones involved in this joint are the following:

- The scapula, or shoulder blade bone.
- And the humerus, the upper arm bone.

These bones are covered by special tissue called cartilage. The smooth surface of the cartilage allows for smooth, painless movement at the shoulder joint.Ligaments connect the bones and help stabilize the shoulder.

To allow your shoulder to move in all directions, strong muscles



attached to the shoulder blade anchor themselves in the head of the humerus through specialized tendons. The combination of these tendons is known as 'rotator cuff.'

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Symptoms and their Causes

Arthritis, or inflammation, of the joint causes the surfaces in a joint to become rough. Injury to the shoulder can cause cartilage tears and degeneration.

The pain may prevent normal work and activity. Moving the arm may become very difficult.

Alternative Treatments

Patients may try medications such as aspirin or ibuprofen to decrease the inflammation in the shoulder.

Physical therapy can help to keep the joint as mobile as possible. It can also strengthen muscles to prevent further injury.

Injections of steroids in the shoulder joint may relieve symptoms. If the pain prevents normal activity and does not respond to other treatments, then shoulder replacement may be considered.

Surgical Treatment

The joint is approached through a large incision in the shoulder region.

The upper joint of the humerus, or upper arm bone, is then cut and removed. The removed part is replaced by an artificial surface known as a 'prosthesis.'

Depending on the type, the prosthesis may need to be cemented to the bone.

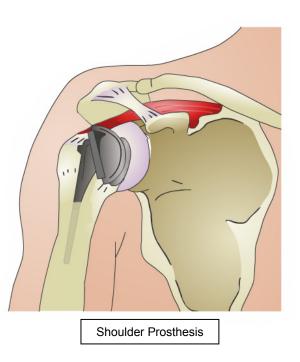
At the end of the operation, the incision is closed. The patient usually goes home in a few days.

Risks and Complications

This operation is very safe. There are, however, several possible risks and complications. These are very unlikely but possible.



Physical Therapy



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You need to know about the risks and complications just in case they happen. By being informed you may be able to help your doctor detect complications early.

The risks and complications include those related to anesthesia and those related to any type of surgery.

Risks of general anesthesia include nausea, vomiting, urinary retention, cut lips, chipped teeth, sore throat, and headache. More serious risks of general anesthesia include heart attacks, strokes, and pneumonia.

Your anesthesiologist will discuss these risks with you and ask you if you are allergic to certain medications.

Blood clots in the legs can occur due to inactivity during and after the surgery. These usually show up a few days after surgery. They cause the leg to swell and hurt.

Blood clots can become dislodged from the leg and go to the lungs where they will cause shortness of breath, chest pain and possibly death. It is extremely important to let your doctors know if any of these symptoms occur.

Sometimes the shortness of breath can happen without warning. Getting out of bed shortly after surgery may help decrease the risks of this complication.

Some of the risks are seen in any type of surgery. These include:

- Infection, deep or at the skin level.
- Bleeding, either during or after the operation.
- Skin scars that may be painful or ugly.

Other risks and complications are related specifically to this surgery. These again are very rare. However, it is important to know about them.

Organs around the shoulder area and close to the surgery may be injured. However, these injuries rarely occur.

Arteries, veins and nerves going to the arm may be injured resulting in arm weakness or decreased sensation.



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The pain may not be relieved by the operation. It may even be worse than before surgery. However, this occurs rarely.

The prosthesis may become loose from the adjoining bone or dislocate. A difference in arm length may occur in rare cases.

The shoulder may not work as well as a normal shoulder joint. It may feel stiff. In extremely rare cases, the patient may have a potentially fatal allergic reaction to the cement used.

After the Surgery

Most patients go home a few days after the operation. You may also be given a sling to use for a short period after the operation. You will need physical and occupational therapy to rehabilitate your shoulder.

Summary

Sometimes the shoulder can be severely damaged from a variety of causes, such as arthritis or an injury. This can cause pain and make it so a person cannot use the arm.

When appropriate, a shoulder replacement can replace the joint at the upper part of the humerus, the upper arm bone. The artificial replacement part is called a 'prosthesis.'

Shoulder replacement surgery is successful in helping to decrease your pain and to improve your quality of life.

This operation is very safe with good results. However, as you have learned, complications may happen. Knowing about them will help you detect them early if they happen.



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