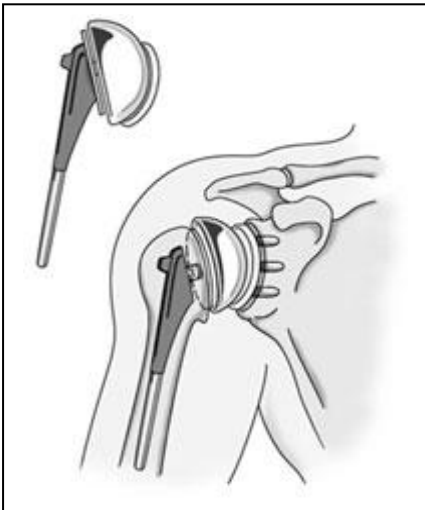


Rehabilitation after a Total Shoulder Replacement

The shoulder joint is made up of a ball (the humerus/arm bone) and a socket (the glenoid). In patients with shoulder arthritis the cartilage on the ball and socket deteriorates. As this process worsens, the joint surfaces become rough and this makes the shoulder stiff and painful. Another reason is following severe trauma to the joint for example in a car crash or sporting injury.



What is a total shoulder replacement?

This operation replaces the damaged surfaces of the shoulder joint with artificial parts made from plastic and metal. A total shoulder replacement is where both the ball and the socket components are replaced. Depending on the damage to your shoulder, your consultant may replace just the ball component - a procedure called a hemiarthroplasty.

What is the aim of a shoulder replacement?

The aim is to reduce your shoulder pain and it may improve your shoulder movement.

What is the initial treatment after the operation?

After the operation it is common to have weakness or numbness in the arm as a result of the local anaesthetic. This should wear off in 24-48 hours.

The most common problems people face is increased pain and decreased range of movement. This can be due to swelling around the new joint after the operation. Initially heat, redness, bruising and swelling are common and should resolve over 4-6 weeks. You may find applying **ice** to the wound site (a bag of frozen peas or cold gel pack wrapped in a damp towel) for 10 minutes and painkillers as recommended by your GP can help to manage these symptoms.

It is important to check the **wound site** regularly and report any feeling of itchiness or if the wound feels very hot to your GP, as this may be a sign of infection.

After the operation you will need to wear a **slings** continuously for 6 weeks, which includes wearing it at night. Only remove it for exercises as directed by your surgeon/physiotherapist.

You will be given **exercises** after the operation. It is important to move your hand, wrist and elbow to avoid stiffness (see the exercises attached).

Be aware of your **posture** when sitting or standing. Try to gently bring your shoulder blades down and in towards the spine.

Don't push into painful ranges of motion until instructed by your physiotherapist.

You will be unable to lift anything heavier than a cup of tea until instructed otherwise by your physiotherapist.

You may find putting a towel/pillow under your shoulder helpful when lying flat on your back to help reduce symptoms. The towel/pillow will help to support the joint as your muscles relax before you go to sleep.

When can I start to drive?

This will be advised by your consultant's team at your six week follow up appointment. You should check your insurance policy as you may need to inform your insurance company of your operation.

