



# Duke Orthopaedics: Upper Extremity Division

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## *Total Shoulder Arthroplasty*

### *What is Osteoarthritis or Degenerative Joint Disease?*

Cartilage serves as a lubricated cushion between the bones of the joint. It normally has only a third the friction of polished ice on ice—very smooth. In osteoarthritis, the surface layer of cartilage breaks down, becomes rough, and wears away. This allows the bones under the cartilage to rub together painfully and eventually become deformed.

### *What is a Total Shoulder Arthroplasty?*

A total shoulder arthroplasty (shoulder replacement) is a surgical procedure in which both parts of an arthritic joint are replaced with an artificial joint. The surface of the ball (humeral head) is replaced with metal and the socket (glenoid) is resurfaced with plastic. This artificial joint is designed to move like a normal, healthy joint.

### *How do you replace the shoulder?*

The prosthesis will be placed through an incision down the front of the shoulder. The ball is usually pressed to fit into place while the socket will be held with bone cement.

### *Length of Stay*

There is a possibility of staying one night after surgery or going home the same day of surgery. If you do not stay the night, someone must stay during the entire length of the procedure. You will need to have someone to drive you home after you have been discharged. The surgery usually takes approximately 2 hours to complete.

### *Anesthesia*

Patients usually have two types of anesthesia for this surgery. The first is general anesthesia, which means you are asleep. The second type of anesthesia is a nerve block with sedation so you will not remember the procedure. Your arm will be numb and will feel very strange. The nerve block will last approximately 2-3 days depending on the type of block used. The anesthesiologist will speak to you on the day of surgery. The ultimate choice of anesthesia technique is up to you and your anesthesiologist.

### *Incision*

You will have an incision down the front of your shoulder. After the incision has healed, it is usually not objectionable.

### *Blood Thinner*

You will be instructed to take a baby Aspirin (81mg) for 4 weeks after surgery. This is to help prevent blood clots since your operative arm will be immobilized during this time. If you are unable to take Aspirin or if you take other blood thinners, please let us know.



### ***Pain Control***

While admitted to the hospital, you may have pain medication administered through your IV and then you will be transition to pain medication you take by mouth. While admitted, we will make sure your pain is well controlled on the oral pain medication prior to discharge. You will have this pain medication prescribed for when you are discharged home. After the nerve block wears off you will have post-surgical discomfort, so start your pain medicine when the block begins to wear off.

### ***Diet***

The combination of anesthesia and pain medications can cause nausea in some patients. If you are prone to nausea or show signs of nausea prior to discharge, a prescription for an anti-nausea medication will be provided. You may wish to advance your diet slowly the day of surgery to avoid exacerbation of nausea. Surgery and the narcotic pain medications are very constipating. Your diet should include plenty of water, fiber, fresh fruits and vegetables.

### ***Sling***

Your arm will be placed in a sling prior to leaving the operating room. You will remain in your sling for approximately 6 weeks. Your arm will be placed in a sling prior to leaving the operating room. You are to remain in your sling full time, 24 hours a day, until our staff tells you otherwise. This includes sleeping in your sling. You may remove the sling only for showering, changing clothes, and exercises as instructed by our staff or your physical therapist. For the six weeks that you are in your sling, **you are not permitted to drive**.

### ***Dressings***

You will go home with an Aquacel dressing. After 5 days you may remove the dressings. There may be steri strips over the incisions. The steri strips are to remain in place until they fall off on their own. You may see blue or clear sutures (stitches) or staples sticking out of the incision. These will be removed at your first postoperative visit approximately 14 days after your surgery.

### ***Physical Therapy***

Before leaving the hospital you will be taught your home exercise program. Outpatient physical therapy will begin 5-7 days following surgery. Therapy will continue for 3-6 months following surgery until full recovery achieved.

### ***Restrictions***

Recovery from a total shoulder replacement is three months. During that time you will have restrictions on the use of your operative arm. You may drive when you are no longer in the sling and you feel that you can safely control a car and you are **NOT** taking narcotic pain medication. You may continue to improve with ROM, swelling, and pain for up to a year after surgery.

**Day of surgery to Week 6:** no closing doors, no reaching behind your back, leaning on operative extremity