

Shoulder Replacement FAQ's:

1. How do you determine whether I would be a candidate for shoulder replacement surgery?

Normally, x-rays will be taken to evaluate your joint for arthritis. If you have bone-on-bone arthritis, and if your symptoms are affecting your quality of life, like your ability to perform daily activities, exercise, and your quality of sleep, then you should consider having this surgery. However, the ultimate decision should be made on whether you are healthy enough to undergo anesthesia, and if you have ample social support. The decision should be made with the consultation of your primary care doctor, as well as your family or friends who will be there to support you during your recovery.

2. What would happen if I postpone surgery for six months? One year?

The arthritis will likely just stay the same, and the arthritis will continue to progress very slowly over the years.

3. Are there alternative treatments I could try first?

You could try taking Tylenol or Motrin, icing after painful activities, and limit the activities which cause pain.

4. What's the difference between an anatomic and a reverse shoulder? How's the decision made as to which procedure is appropriate?

An anatomic, or standard, shoulder replacement is shaped like the normal shoulder joint. A reverse shoulder has a "reversed" geometry of the normal ball-and-socket, which changes the biomechanics of how the muscles would move the shoulder. The status of your rotator cuff will be the main factor which determines the type of replacement which would be most appropriate, but this is ultimately determined by surgeon and sometimes this is an intraoperative decision.

5. Will I need rotator cuff repair as well?

Usually the anterior rotator cuff tendon needs to be cut in order to gain access to the shoulder joint during surgery, and is meticulously repaired during a typical shoulder replacement.

6. What are the most common complications and how are they treated?

Some complications include failure of the rotator cuff to heal after surgery, and loosening of the socket with long-term use.

7. What are the risks associated with shoulder replacement?

Bleeding, infection, and nerve injury are rare complications, as they are with any other orthopedic procedure.

8. How many times have you performed this surgery?

I have performed this surgery thousands of times over my career.

9. How long does surgery take?

The actual surgery usually takes about one hour, but it takes a few hours to include the set-up time, then to awaken you from anesthesia, and wait for x-rays.

10. How long will the incision/scar be?

The scar will be 3-4 inches and I typically use stitches which dissolve under the skin.

About recovery...

11. What is the expected recovery time?

It takes about 3-6 months for most of the recovery to occur. However, the total recovery might take about 9-12 months to get to the point that you “forget” you have had surgery, and the shoulder feels like a natural part of your body.

12. Will I need to have my arm in a sling? If so, for how long?

Yes, you will need to wear the sling for 4-6 weeks, depending on details of your surgery.

13. How long will I have to be away from work?

Depending on your job, 2 weeks to 3 months, on average. If you have a desk job, the answer is about 2-6 weeks. If you have a physically demanding job, the answer is about 3 months.

14. How will I feel in one month after surgery? Two months? One year?

In one month, you will be feeling much better than you did before surgery, but it is normal to have some pain with stretching movements. 95% of people do not need to take the pain medication at one month after surgery. In two months, you will feel like you do not need any pain medication, but maybe some Tylenol occasionally. At one year, your shoulder should feel like a natural pain-free part of your body.

15. How many days, if any, will I be in the hospital after surgery

Most people do not need to stay the night in the hospital after the surgery. If you are older or have major multiple medical problems, then a one-night stay will be arranged ahead of time.

16. Will I have physical therapy? If so, how often and for how long? Will I do therapy on my own or will I see a physical therapist?

Yes, you will see a physical therapist on an outpatient basis about once a week, after surgery. This should be arranged ahead of time.

17. Will I need full-time or part-time care? If so, for how long?

You should have a family member or friend stay with you for the first couple of nights after surgery. After that, you might need to have a friend or family member check on you for the first few weeks after surgery.

About returning to activity...

18. When can I sleep on the operative side after surgery?

About 4-6 months after surgery.

19. When can I shower after surgery?

5 days after surgery, you can get the incision wet, but no soaking in a hottub or bathtub until about one month after surgery.

20. When will I be able to resume normal lifestyle activities (e.g., work, sports, housework, gardening, etc.)?

No lifting more than a cup of coffee until about 3 months after surgery.

21. Which sports, if any, will I be able to play again?

You should be able to return to golf, tennis, swimming.

22. Will I have any permanent activity restrictions?

No lifting more than 15 pounds repetitively overhead to protect the prosthesis from wear and tear.

24. Will I set off metal detectors at the airport?

Sometimes, yes, depending on the specific machine at the airport. They will have to use the wand if this happens. This is very common nowadays because there are millions of people with artificial joints. Give yourself extra time allowance at the airport.

25. Will I need antibiotics for dental procedures?

Yes, I prefer my patients to take antibiotics for dental procedures.

About the implant...

26. What is the implant made of?

Titanium and cobalt chromium metal, and polyethylene plastic. This is the same material that hip and knee replacements are made of.

27. Is there a possibility the implants will need to be replaced in the future?

The implant is a mechanical device, which is subject to wear and tear over time.

28. What can I do to help keep my joint replacement functioning as long as possible?

Avoid repetitive high-impact activity like heavy weight-lifting overhead.