

Shoulder replacement surgery

Introduction

Your shoulder is a ball and socket joint and can wear over time, requiring replacement surgery to change or repair it. Shoulder Replacement Surgery is an effective way to reduce the pain and the sometimes life limiting effects of worn or damaged shoulder joints.

The most common reason for replacing the shoulder joint is arthritis, either osteoarthritis (wear and tear) or rheumatoid arthritis. It may also be necessary following a fracture or bad accident. With all forms of arthritis, the joint becomes painful and difficult to move. Sometimes the deep layer of muscles (the 'Rotator Cuff') which help control shoulder movements can also be worn or damaged.

There are 2 types of shoulder replacement: anatomic and reversed. Your options will be discussed at clinic with your Orthopaedic team and are dependent on the condition of your shoulder.

Patients can go home as soon after surgery as they are deemed fit medically and they can cope with mobilising safely. This may be on the day of surgery or any time from the day after surgery. Some patients will have shoulder replacement surgery as a day case, meaning they don't have to stay in hospital overnight. Not every patient having a shoulder replacement is suitable for day case surgery but if you are a candidate this will have been discussed with you by your consultant.

Guidance for Patients

Lifestyle

We would encourage anyone waiting for surgery to lose some weight if necessary and to stop smoking. Both these measures are known to lower risk of complications following surgery.

Losing weight is not about getting it right – it's about getting started. Making small, simple changes can really help you shed the pounds. Get started today with our tips, support and specialist offers.

You can download a [free NHS weight loss planning app](#) to help you start healthier eating habits, be more active and start losing weight.

With help, you're much more likely to quit smoking than if you use willpower alone. Visit [Make Smoking History](#) to get free access to the latest quitting aids, one-to-one advice and [support in your local area](#)

After your procedure you will have limited use in the operated arm. This will make it difficult to do some daily tasks. Ahead of your surgery date it may be helpful to plan to have some help from family or friends during this time. You could also stock up on food that's easy to prepare, such as

My Planned Care Patient Information Platform

tinned foods and staples like rice and pasta. You could also prepare meals and put them in the freezer. Put things you'll need, such as books and magazines, where you can easily reach them.

Exercise

Whilst you are waiting for your surgery stay as active as you can. Strengthening the muscles around your hip will help your recovery. You may be referred to a physiotherapist who will give you helpful exercises.

My Planned Care Patient Information Platform

Versus Arthritis has produced a handy guide to exercise for shoulder pain. View this [here](#).

Here are some examples:

External rotation with stick in sitting:

In sitting, maintain good posture, place a folded or rolled up towel between the affected arm and your side.

Hold a stick with both hands, shoulder width apart palms facing upwards. Keeping your elbows in, use your unaffected arm to push the bar outwards, away from the affected arm. Do not force into a stretch.

Isometric External Rotation:

In sitting or standing, bend your elbow to 90 degrees. Whilst maintaining your arm at the side of your body. Place the unaffected hand on the outside of the forearm at wrist level and gently push out. This position can be altered moving your arm further outwards whilst maintaining your elbow into your side.

Note 1: you can put a towel between the inside of your arm and your body to help you keep this position. Note 2: to keep this as an early exercise gently push to only 30% of your maximum resistance.

Seated table slide into flexion:

In sitting, rest your hands on a table. Using a duster, slide both hands forwards as far as comfortable. Let your head drop forwards slightly at the end of the movement. Do not force into a stretch.

You can adapt this exercise to make it easier if needed. You could place your forearms on the table with your palms facing each other and your elbow slightly flexed.

Pain Management:

You can take pain relief such as Paracetamol, Anti-inflammatory creams, Codeine, Non-steroidal anti-inflammatory drugs. If you need any advice, your local pharmacy will be able to help.

There are a number of resources to help you manage your pain:

- [10 ways to ease pain](#)
- The Chartered Institute of Physiotherapy has produced helpful [guidance for managing pain and improving your quality of life](#)

My Planned Care Patient Information Platform

Mental health support:

It's important during this time to take care of your mind as well as your body. You might be feeling down, worried or anxious while you wait for your surgery.

Here you will find some [general information on mental health issues](#) and some [top tips to improve your mental wellbeing](#). Apps to support your health, mental health and wellbeing:

- Find tested and approved mental health apps [here](#).
- [Feeling anxious?](#)
- [Feeling stressed?](#)
- [Feeling low?](#)
- [Trouble sleeping?](#)

My Planned Care Patient Information Platform

What should I do if my health is deteriorating?

This information is designed to help you manage your symptoms and stay in the best possible health while you wait. It is however possible that some of your symptoms may get worse while you are waiting for your surgery. There are some things to look out for that would indicate you should seek medical help:

1. If your pain gets worse to the point that it is unmanageable with the pain relief suggested by the pharmacist or doctor and you are struggling to cope with it;
2. If your mobility gets worse to the point you are off your feet or unable to work;
3. If your shoulder suddenly deteriorates

If you experience any of these issues we would recommend getting in touch with your hospital team. The number and email should be on your last hospital appointment letter.

Alternatively, you can contact your GP practice. Whilst your GP does not have access to the hospital waiting list to get you seen sooner, if your condition is getting worse they can assess you, give advice and can contact the hospital on your behalf if necessary.

Links to more information

[NHS.uk advice on shoulder pain](#)

Professor Leonard Funk, an Orthopaedic Surgeon, has created a website that contains information and animations of common shoulder surgeries, advice on exercises post-surgery and rehabilitation.
<https://www.shoulderdoc.co.uk/>

[Versus Arthritis information on shoulder replacement](#)