

VERSO REVERSED GEOMETRY SHOULDER REPLACEMENT

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The Reversed Geometry Total Shoulder Replacement is designed for us in Shoulders that have a deficient rotator cuff, arthritis or complex fractures.

It changes the orientation of the shoulder such that the normal socket (glenoid) is replaced with an artificial ball, and the normal ball (humeral head) is replaced with an implant that has a socket into which the ball rests. The design changes the mechanics of the shoulder allowing pain relief and an improvement in function and stability, particularly when using the arm in front of the body.

Day 1

- Mastersling in situ, body belt removed, but sling to remain for 3 weeks.
- Finger, wrist and elbow exercises taught.
- Scapula setting
- Pendular exercises, both flexion/extension and small circles.
- Discharge home when comfortable.
- NB Weight bearing through the arm is contraindicated for 6 weeks, i.e. no pushing through the arm to stand from a chair as this risks dislocating the shoulder.

3 weeks

- Outpatient physio starts
- Wean out of sling if possible, but may continue to be worn outdoors or at night.
- Passive flexion in scapula plane, in supine.
- Active assisted flexion in scapular plane in closed chain.

4-5 weeks

Start anterior deltoid exercises, progressing supine exercises as able.

8 weeks

- Progress anterior deltoid exercises into long sitting at 45 degrees when able, and eventually in standing.
- Loop theraband over a door and get the patient to pull down, the elastic recoil will act as a pulley and gentle stretch the shoulder into flexion.

Can use the arm close to the body for light activities, at waist level, from 3 weeks, e.g. eating, writing. Can also exercise in water (not swimming) from 3 weeks.



Driving: Can resume driving when they have control of movement,

usually 6-8 weeks.

Work: Resume light duties/sedentary work at 6-8 weeks.

Manual work to be advised by the surgeon.

Lifting: Can resume light lifting at waist level at 6-8 weeks.