

PITFALLS AND COMPLICATIONS IN TOTAL SHOULDER ARTHROPLASTY

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Total shoulder arthroplasty is a successful procedure with pain relief being achieved in 90-95% of patients and 2/3 of normal shoulder motion returned in patients with a functioning rotator cuff. Each individual complication following total shoulder arthroplasty is relatively uncommon, however, when added together, complications occur in 10 to 15% of all shoulders according to the reported literature.

Pitfalls in prosthetic replacement of the proximal humerus in cases of fracture are related to operating late (months post injury), relying on ingrowth for fixation of the humeral component (failure to use cement), suspect rehabilitation, and the failure to repair adequately the tuberosities to the humeral shaft.

Complications in total shoulder replacement include glenoid and humeral loosening, polyethylene disease due to poly wear of the glenoid component, instability represented by either subluxation or dislocation, fractures at the stem shaft juncture, rotator cuff tears, infection, nerve injuries and ectopic ossification. Each of these potential complications is discussed as well as ways to avoid and/or solve them.