

ANATOMIC SHOULDER REPLACEMENT

THERAPIST INFORMATION



- The subscapularismuscle is releasedand reattached to the anatomical neck of the humerus. This is why the range of external rotation and resisted internal rotation are limited in the first threeweeks.
- Respecting these limitations, it is very important to start mobilizing with passive and active assisted exercises as soon as possible, and progressing as pain allows.

AIMS OF PHYSIOTHERAPY

- Achieve full range of movement
 - Aim for full passive flexion at 3-4 weeks. Active flexion and abduction should be comfortable to 90 degrees.
 - Aim for Full ROM at 6 weeks.
- Improve scapula control and postural awareness
- Strengthen rotator cuff only after 6 weeks. If it is deficient, anterior deltoid strengthening may be indicated.
- Restoring proprioception with closed chain exercises.

EARLY STAGE: Day 1-5

Day	Treatment Guidelines
Day 1	<ul style="list-style-type: none"> • Finger, wrist and radio-ulnar movements • Active elbow flexion and extension • Ice application to reduce inflammation • NO ACTIVE INTERNAL ROTATION
Day 2	<ul style="list-style-type: none"> • Axillary hygiene taught • Exercises continue as above • Hand gripping exercises • Pendular exercise • Passive flexion in plane of scapula in supine
Day 3-5	<ul style="list-style-type: none"> • Day 5 can begin isometric strengthening of cuff

MIDDLE STAGE 1: 5 days to 3 weeks

Aims	Treatment Guidelines
Increase ROM	<ul style="list-style-type: none"> • Begin passive abduction (maintain shoulder neutral rotation) • Begin passive external rotation to neutral • Continue pendular exercises
Increase muscle control	<ul style="list-style-type: none"> • Commence active assisted flexion in supine • Progress to active assisted flexion in sitting as able • Continue isometric strengthening – NO IR
Proprioception & core stability	<ul style="list-style-type: none"> • Continue scapular setting • Can begin hydrotherapy where available

MIDDLE STAGE 2: 3-6 weeks

Aims	Treatment Guidelines
Increase ROM	<ul style="list-style-type: none"> • Encourage to actively move into all ranges • Gentle self stretching at end of range
Increase muscle control	<ul style="list-style-type: none"> • Add isometric internal rotation • Progress to isotonic strengthening
Proprioception & core stability	<ul style="list-style-type: none"> • Begin to wean from sling

LATE STAGE: 6+ weeks

Aims	Treatment Guidelines
Increase ROM	<ul style="list-style-type: none"> • Continue to regularly stretch the joint to end of range • Can begin breast-stroke if appropriate
Increase muscle control	<ul style="list-style-type: none"> • Progress strengthening (confirm tuberosity healing on X ray) • Deltoid strengthening • Theraband
Proprioception & core stability	<ul style="list-style-type: none"> • Progress proprioception

- Improvement continues for 18-24 months post-operatively and where possible the patient should not be discharged or should continue exercising until their maximum potential has been reached.