

Exercises following Verso reverse shoulder replacement



Introduction

The Verso shoulder replacement is designed for use 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 you.

Following your operation you will have a scar approximately 3 inches long on the front of your shoulder.

Your arm will be supported in a sling and a physiotherapist will teach you how to take it on and off to do your exercises. You will be in hospital for about 1-2 days after your operation.

General guidelines

Pain

A nerve block may be used during the operation which means the shoulder and arm will remain numb for a few hours. The shoulder will be sore when this wears off and this may last a few weeks. It is important to continue to take the painkillers as advised by the hospital. Ice packs may also help reduce the pain. Wrap frozen peas/crushed ice in a damp cold towel and place on the shoulder for up to 10 minutes, allow 20 minutes between each ice pack.

Wearing a sling

You will return from theatre wearing a sling with a body belt. The body belt can be removed once the nerve block has worn off. The sling is used for 2-3 weeks following your operation. It is important that you remove the sling to exercise. You can stop wearing the sling when advised to do so by your physiotherapist.

The wound

Keep the wound dry until it is healed. This normally takes 10 to 14 days. Your stitches are dissolvable and need only to be trimmed at your clinic visit. You should have a waterproof dressing which should remain intact until you see your practice nurse unless told otherwise by the nursing staff.

Follow up appointments

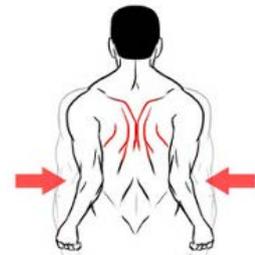
You will have an appointment to be reviewed at the shoulder clinic approximately three weeks, 3 months, 6 months and annually after your surgery. You will be reviewed by your surgeon/ specialist physiotherapist who will check your progress.

Outpatient physiotherapy will be arranged approximately 1 week after your surgery and continue for as long as necessary.

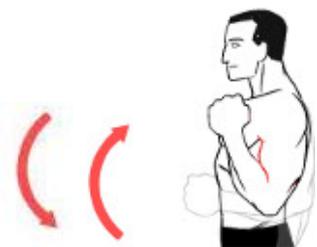
Following the 'Verso' shoulder replacement it is important you follow a strict regime of exercises (outlined below). The exercises must be done a minimum of ten times each, three times a day. You may remove the sling at 3 weeks (sometimes earlier if recommended by the consultant). For the first 6 weeks after the operation you must not force your hand behind your back (e.g. to fasten bra) or weight bear through the arm (e.g. pushing through the arm of a chair to stand). You will begin physiotherapy between 1 to 3 weeks after the surgery. You can begin hydrotherapy from 3 weeks after the surgery.

Day 1**Begin shoulder girdle exercises:**

- Shrug the shoulders up to the ears.
- Roll the shoulders backwards.
- Squeeze the shoulder blades together.

**Begin elbow exercises:**

- Bend and straighten the elbow.
- With a bent elbow turn the forearm over in a clockwise and anti-clockwise direction.

**Begin wrist and hand exercises:**

- Bend the wrist forwards and backwards
- Tilt the wrist from side to side.
- Circle the wrist in a clockwise and anticlockwise direction.
- Squeeze and make a fist.
- Ensure you maintain a good upright posture in your sling.

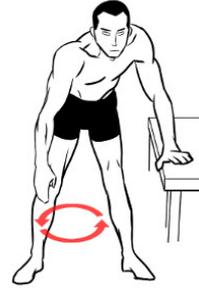


Day 2 – Discharge

Continue shoulder girdle, elbow, wrist and hand mobility exercises and postural awareness.

Begin gentle pendulum exercises:

- In a standing position, lean forwards and allow the arm to hang pointing towards the floor.
- Then gently circle the arm.

**Begin passive shoulder exercises:**

- Laying on your back use the good arm to support the bad arm and lift it straight above your head.
- Sitting in a chair alongside a table, slide the arm along the tabletop away from the body.
- Standing, tuck your elbows into your side, elbows bent, hold a stick or broom. Use the good arm to push the bad arm away from the body keeping the elbows tucked into the side (a rotational movement of the shoulder).
- Sit in a chair with the elbow of your operated arm resting on a table. Bend the elbow to 90 degrees, fingers pointing towards the ceiling. Then add gentle pressure through the wrist using the other hand, pushing the hand towards your stomach.

Weeks 1 – 3

Continue shoulder girdle, elbow, wrist and hand mobility exercises and postural awareness.

Continue gentle pendulum exercises in forward leaning position.

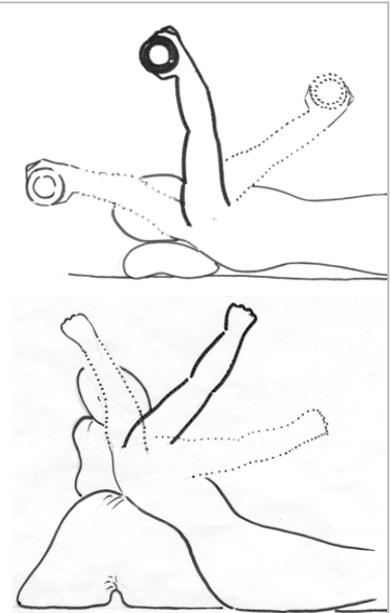
Continue passive shoulder mobility exercises.

Begin deltoid exercises:

- Lie down flat on your back with a pillow supporting your head.
- Raise your weak arm to 90 degrees vertical, using the stronger arm to assist if necessary.
- The elbow should be straight and in line with your ear.
- Hold your arm in this upright position with its own strength.
- Slowly with your fingers, wrist and elbow straight, move the arm forwards and backwards in line with the outside of the leg, as per diagram (gentle movement from both sides of the arm upright position)



- Keep the movement smooth and continuous for 5 minutes or until you get tired.
- As you get more confidence in controlling your shoulder movement, gradually increase the range of movement until your arm will move from the side of your thigh to above your head, touching the bed and returning.
- Keep the movement smooth and continuous for 5 minutes or until you get tired.
- As you get more confidence in controlling your shoulder movement, a light weight (e.g. tin of beans or small paperweight) should be held in the affected hand.
- At this stage you may recline the head of your bed or put some pillows underneath your back to recline your position.
- Having more confidence in controlling your shoulder movement, gradually go to sitting and eventually standing.



Weeks 3 – 6

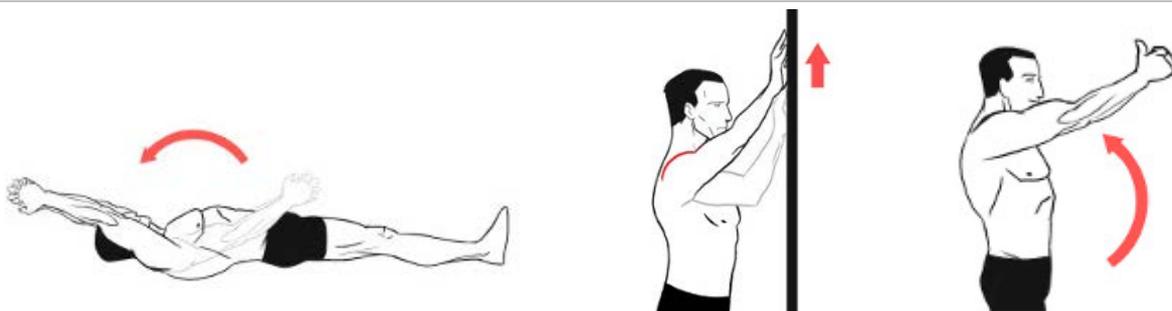
Continue shoulder girdle, elbow, wrist and hand mobility exercises.

Continue pendulum exercises.

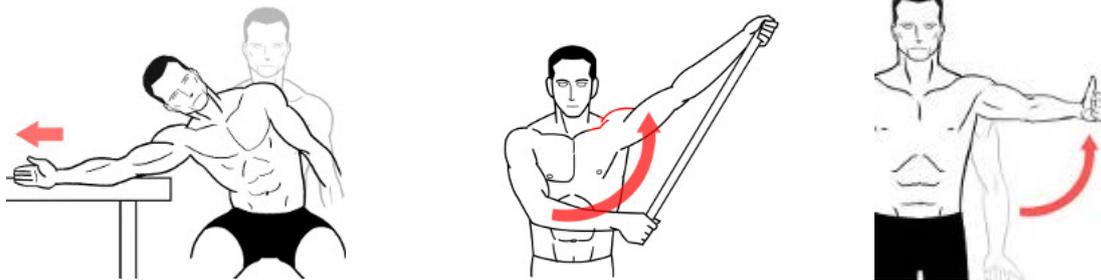
Continue to progress the deltoid programme, following the principles of low weight and high repetition, to enhance shoulder endurance and minimise the risk of injury/dislocation. Continue to sit in a chair with the elbow of your operated arm resting on a table. Bend the elbow to 90 degrees fingers pointing towards the ceiling. Then add gentle pressure through the wrist using the other hand, pushing the hand towards your stomach.

Progress passive shoulder exercises, to active assisted, to active:

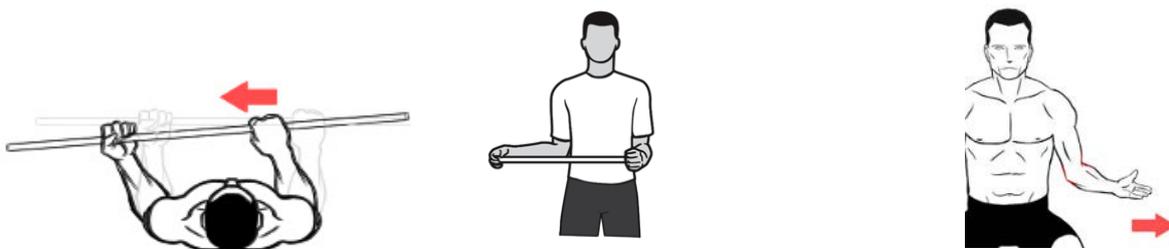
- Lying down, use the other hand to lift the arm above the head.
- Standing, slide the arm up the wall.
- Standing, lift the arm above the head unassisted.



- Sitting in a chair alongside a table, slide the arm along the tabletop away from the body.
- Standing, holding a stick or broom, use the good arm to push the operated arm away from the body, around overhead.
- Standing, lift the arm away from the body, around overhead unassisted.



- Standing or sitting, tuck your bent elbow into your side, holding a stick or broom. Use the good arm to turn the bad arm away from the body keeping the elbows tucked into the side.
- Standing or sitting, tuck your bent elbow into your side, holding a stick or broom. Use the operated arm as able to turn arm away from the body keeping the elbow tucked into the side, use the other arm pushing on the stick as needed.
- Standing or sitting, tuck your bent elbow into your side, turn the arm away from the body unassisted.

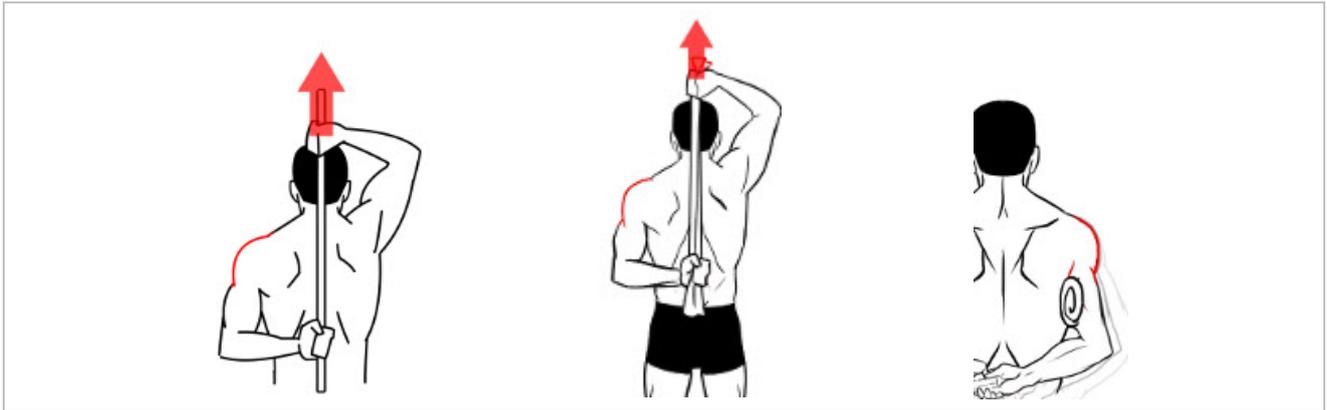


Week 6+

Continue the deltoid programme, following the principles of low weight and high repetition.

Begin behind the back passive shoulder exercises, progressing to active assisted, to active:

- Standing, lower a stick down you back using your good hand. Reach up behind your back grasping the stick in your operated side hand. Use the good arm to gently lift the hand up the back.
- Standing, lower a towel down you back using your good hand. Reach up behind your back grasping the towel in your operated side hand. Lift the bad arm as much as possible up behind the back, using the good arm to assist it.
- Standing, lift the bad arm up behind the back unassisted. A towel under the arm provides a small amount of traction and may make the exercise more comfortable but is not essential.



Resuming normal activities

Timings for returning to functional activities are approximate and will differ depending upon the individual. However, the earliest that these activities may commence are:

- Driving: 3-8 weeks
- Lifting: Can resume light lifting at waist level at 6-8 weeks. No lifting at shoulder height until good deltoid strength is achieved
- Swimming: breaststroke 3-12 weeks; front crawl 3 months
- Golf: 3 months
- Contact sports: 6 months
- Return to work: sedentary jobs may return at 6-8 weeks; manual workers to be guided by your consultant at your three month follow-up appointment.

Note: These are guidelines only.

Further information

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Visit www.royalberkshire.nhs.uk www.readingshoulderunit.com

Images courtesy of <http://www.pt-helper.com>

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