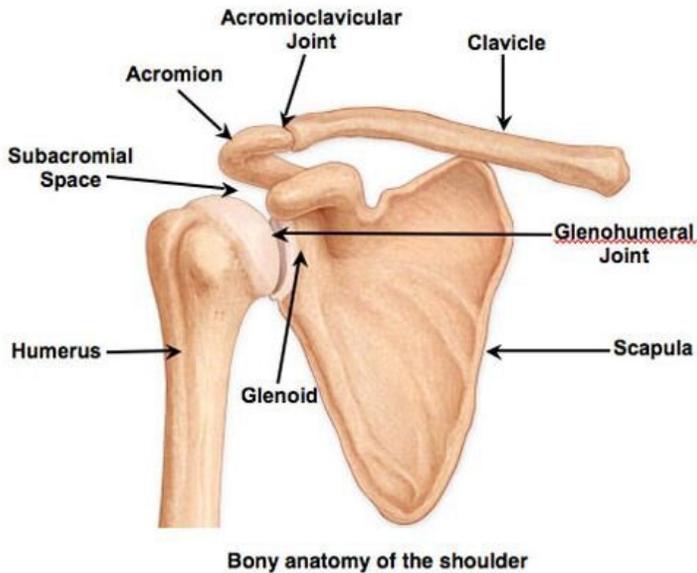


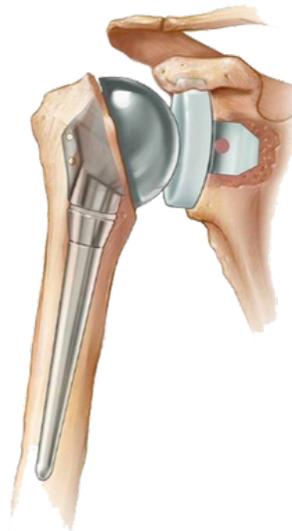
**Kyle Flikkema, DO**

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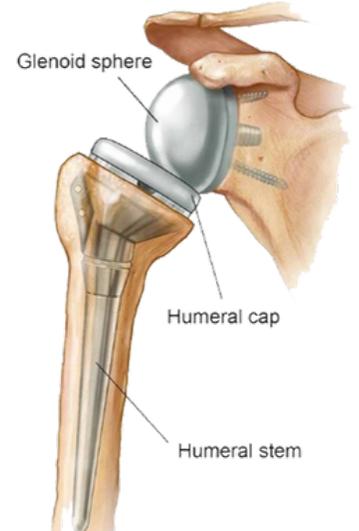
**Anatomic vs Reverse Total Shoulder Replacement**



Total shoulder arthroplasty

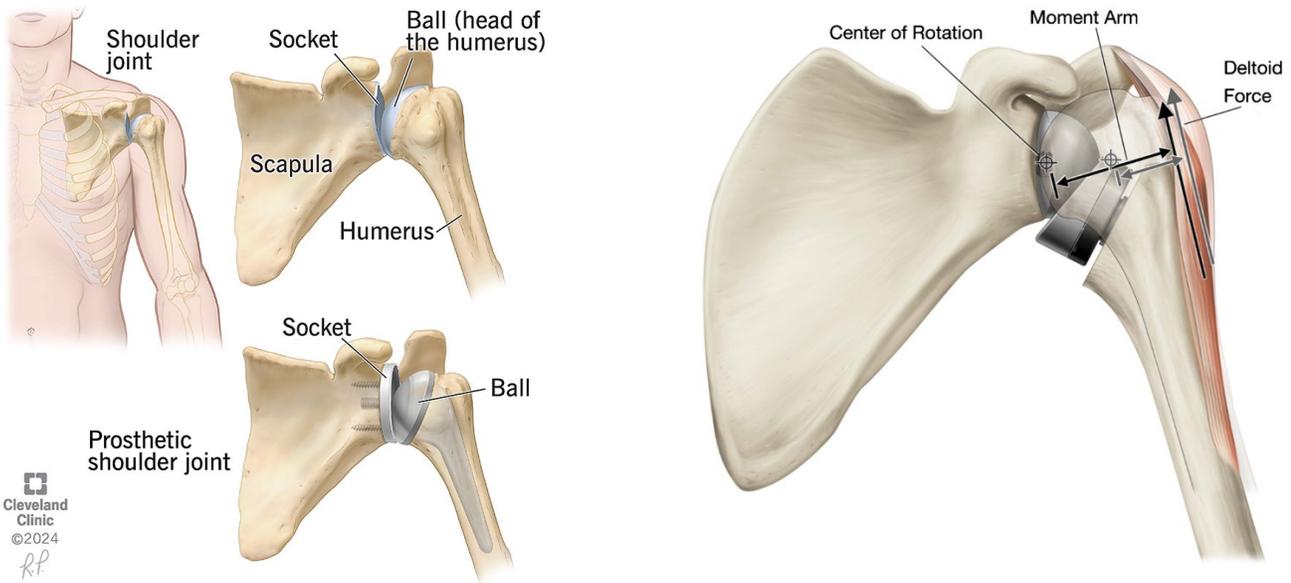


Reverse shoulder arthroplasty



- **Anatomic shoulder replacement** involves keeping the layout of your original anatomy the same: ball on the humerus, socket on the scapula. This will require healthy and intact rotator cuff muscles for full and pain free function.
- **Reverse shoulder replacement** involves reversing the layout of your shoulder anatomy: the ball is now on the scapula, the socket is now on the humerus. This does not require intact or healthy rotator cuff muscles.

## Shoulder replacement



	<b>Anatomic</b>	<b>Reverse</b>
<b>Anatomy</b>	Maintained anatomy	Reversal of ball and socket
<b>Rotator Cuff</b>	Healthy and intact rotator cuff	No need for intact rotator cuff
<b>Movement</b>	Requires intact rotator cuff for full movement	Deltoid muscle and new anatomy compensate for lack of cuff
<b>Outcomes</b>	Pain free movement, best range of motion	Pain free movement, slightly decreased range of motion

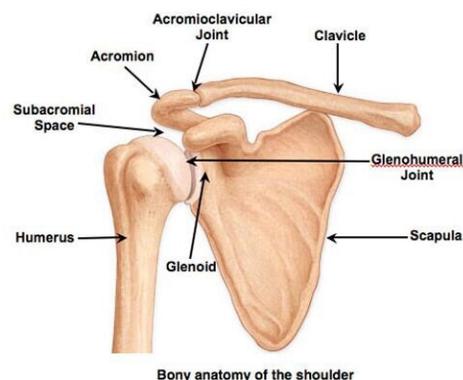
# Understanding Shoulder Replacement Surgery

## Total Shoulder Arthroplasty vs Reverse Total Shoulder Arthroplasty

Your shoulder joint is a **ball-and-socket joint**.

- The **ball** is the top of the upper arm bone (humerus).
- The **socket** is part of the shoulder blade (glenoid).

Healthy cartilage allows the ball and socket to move smoothly. Arthritis or severe rotator cuff damage can wear down this cartilage, causing **pain, stiffness, and loss of motion**. When non-surgical treatments no longer help, a **shoulder replacement** may be Recommended. There are **two main types** of shoulder replacement surgery:



### 1. Total Shoulder Arthroplasty (Anatomic Shoulder Replacement)

This procedure **replaces the damaged joint while keeping the normal anatomy of the shoulder**.

#### How it works

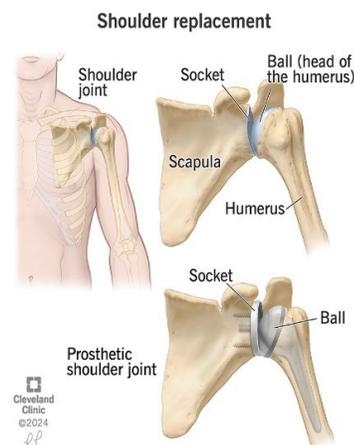
- The damaged **ball of the humerus** is replaced with a metal ball.
- The **socket (glenoid)** is resurfaced with a plastic component.
- The prosthesis mimics the **natural shape of the shoulder joint**.

#### Who it is best for:

Patients who have:

- Shoulder arthritis
- **An intact and functioning rotator cuff**

The **rotator cuff muscles** are essential for this surgery because they help stabilize and move the joint.



### 2. Reverse Total Shoulder Arthroplasty

This procedure **switches the positions of the ball and socket**.

#### How it works:

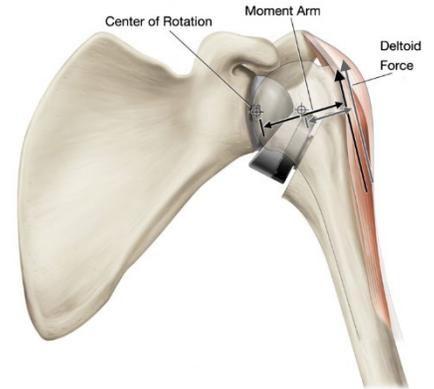
- A metal ball is attached to the socket (glenoid) of the scapula.
- A socket-shaped component replaced the ball of the humerus.

This design allows the **deltoid muscle** (instead of the rotator cuff) to lift the arm.

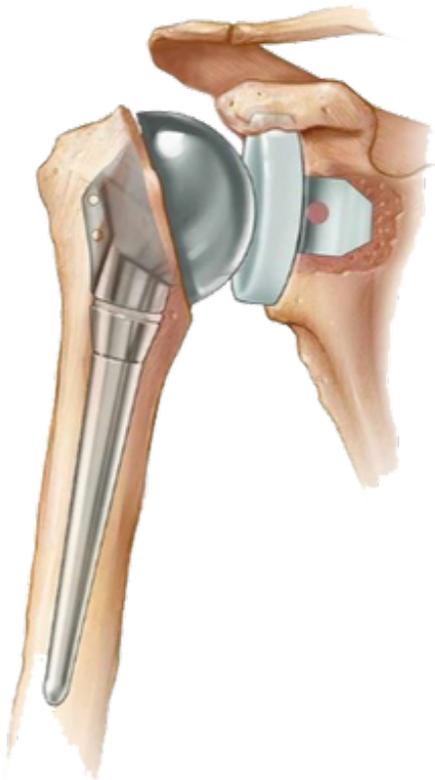
**Who it is best for:**

Patients with:

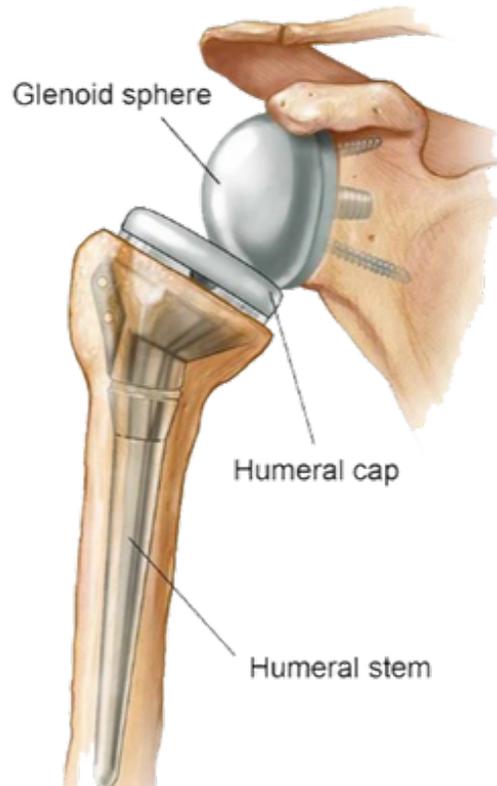
- **Large or irreparable rotator cuff tears**
- **Older patients with concern for future rotator cuff tears**
- Rotator cuff tear arthritis
- Failed previous shoulder surgery
- Certain fractures
- Severe shoulder instability



Total shoulder arthroplasty



Reverse shoulder arthroplasty



## Frequently Asked Questions

### Why are there two different types of shoulder replacements?

Different shoulder problems require different mechanics.

- **Standard shoulder replacement** works best when the rotator cuff is **healthy**.
- **Reverse shoulder replacement** works when the rotator cuff is severely damaged or missing. The reversal allows the deltoid to compensate for lack of rotator cuff.

### Will my shoulder move normally after surgery?

Most patients experience:

- **Less pain**
- **Improved range of motion**
- **Better ability to perform daily activities**

**Generally, an anatomic shoulder replacement will gain more range of motion compared to a reverse; however, most do not notice a significant difference between the two.**

### How long do shoulder replacements last?

Modern implants commonly last **15–20 years or longer**, depending on:

- Activity level
- Bone quality
- Overall health
- Implant type

### What is recovery like?

Typical recovery includes:

- Sling use typically between 4 and 6 weeks
- Physical therapy to restore motion and strength
- Gradual return to daily activities over **3–6 months**

**Full recovery on average takes 6–12 months. However, some may continue to gain improved function for up to 2 years afterwards.**

## What activities can I do after shoulder replacement?

Most patients can return to:

- Golf
- Pickleball
- Swimming
- Light exercise
- Daily activities without pain

Heavy repetitive lifting and high-impact sports are usually discouraged. However, Dr. Flikkema usually does not have a weight restriction for either reverse or anatomic shoulder replacements. If repetitive heavy lifting is necessary for a patient's return to work or daily activities, they may usually return to these, however they will be at an increased risk of the shoulder replacement wearing down faster.

## Why are some patients not a candidate for rotator cuff repair?

The **rotator cuff** is a group of four muscles and tendons that stabilize and move the shoulder. Sometimes a torn rotator cuff **cannot be repaired surgically**. Examples of this include:

### 1. The Tear Is Too Large

Very large tears may retract (pull away from the bone) and cannot be brought back to their normal attachment.

### 2. The Tendon Has Degenerated

Over time, the tendon tissue may become thin, weak, or frayed, making repair unlikely to heal.

### 3. Muscle Atrophy and Fatty Degeneration

If the tear has been present for a long time, the muscle may shrink and develop fatty changes. When this happens, the muscle may no longer function even if the tendon is repaired.

### 4. Poor Tendon Mobility

Scar tissue and retraction may prevent the tendon from reaching the bone without excessive tension.

### 5. Advanced Shoulder Arthritis

When arthritis develops along with a rotator cuff tear, repairing the tendon alone will not solve the underlying problem.

If you have additional questions about your shoulder condition or treatment options, please discuss them with Dr. Flikkema or his team. Please refer to Dr. Flikkema's website to find his physical therapy and rehab protocols.