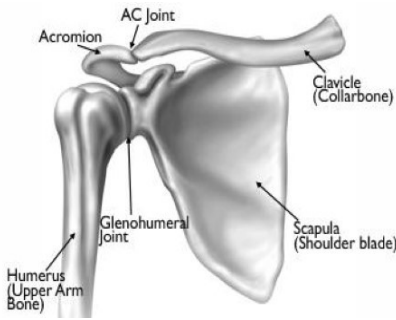


# SHOULDER ARTHRITIS



Your shoulder is made up of three bones: your upper arm bone (humerus), your shoulder blade (scapula), and your collarbone (clavicle). The head of your upper arm bone fits into a rounded socket in your shoulder blade. This socket is called the glenoid. A combination of muscles and tendons keeps your arm bone centered in your shoulder socket. These tissues are called the rotator cuff.

There are two joints in the shoulder, and both may be affected by arthritis. The first, called the acromioclavicular (AC) joint, is located where the clavicle meets the tip of the shoulder blade (acromion). The second is the glenohumeral joint where the head of the humerus fits into the scapula.

## Osteoarthritis

Also known as “wear-and-tear” arthritis, osteoarthritis is a condition that destroys the smooth outer covering (articular cartilage) of bone. As the cartilage wears away, it becomes frayed and rough, and the protective space between the bones decreases. Osteoarthritis usually affects people over 50 years of age and is more common in the acromioclavicular joint than in the glenohumeral shoulder joint.

Post-traumatic arthritis is a form of osteoarthritis that develops after an injury, such as a fracture or dislocation of the shoulder. Arthritis can also develop after a large, long-standing rotator cuff tendon tear. The torn rotator cuff can no longer hold the head of the humerus in the glenoid socket, and the humerus can rub against the acromion causing arthritis to develop.

## Symptoms

The most common symptom of arthritis of the shoulder is pain, which is aggravated by activity and progressively worsens. Limited motion is another common symptom. It may become difficult to lift your arm to comb your hair. You may hear a grinding, clicking, or snapping sound (crepitus) as you move your shoulder. Night pain is common and sleeping may be difficult.

## Nonsurgical Treatment Options

Initial treatment of arthritis of the shoulder is nonsurgical. Your doctor may recommend the following treatment options:

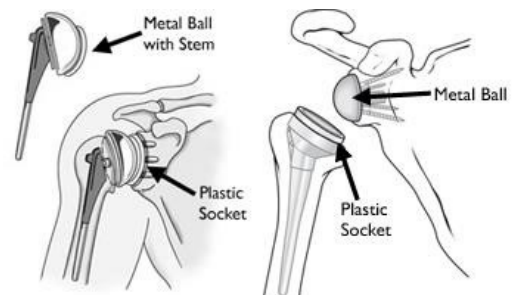
- Rest or change in activities to avoid provoking pain
- Physical therapy to improve range of motion
- Nonsteroidal anti-inflammatory medications (NSAIDs)
- Corticosteroid injections

## Surgical Treatment Options

Cases of mild glenohumeral arthritis may be treated with arthroscopy where the surgeon will debride (clean out) the inside of the joint.

Advanced arthritis of the glenohumeral joint can be treated with shoulder replacement surgery, in which the damaged parts of the shoulder are removed and replaced with artificial components, called a prosthesis:

- Hemiarthroplasty. The head of the humerus is replaced.
- Total shoulder arthroplasty. Both the head of the humerus and the glenoid are replaced.
- Reverse total shoulder arthroplasty. The socket and metal ball are opposite; the metal ball is fixed to the glenoid and the plastic cup is fixed to the upper end of the humerus. A reverse total shoulder replacement works better for people with cuff tear arthropathy because it relies on different muscles (not the rotator cuff) to move the arm.



Conventional Shoulder Replacement      Reverse Total Shoulder Replacement

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