

Rehabilitation Guidelines | Total Shoulder Replacement (Reverse)

The recovery process

Rehabilitation after reverse shoulder replacement is a structured and progressive process designed to restore movement and function while initially protecting the joint.

Your program will be directed by Dr. Dallalana following the outline below unless advised otherwise, and guided by your physiotherapist through to completion.

General guidelines

- A sling is worn initially, for **4 weeks**
- Early rehabilitation focuses on **gentle movement** restoration
- Basic daily function is permitted early in recovery

Weeks 0-4: Early recovery and joint protection

During the first phase, the focus is on protecting the implanted joint and beginning gentle movement. Use ice for the first week to help with pain and swelling

Sling Use

- A **sling** is needed for the first **4 weeks (It is not full-time)**



Unless advised otherwise the sling is not needed when in your home, nor in bed at night.

Use a sling when walking around out of the home, or within the home only when walking for any extended period e.g. around the garden.

The sling can be removed and **both hands** used freely to write, type, eat and assist with dressing and with personal hygiene.

- The sling should be loose fitting, and no waist strap should be used
- The sling is used to protect from excessive movement and use, from sudden rapid movement and from other people. It is not there to support the weight of the arm as such.

Use of the arm

- Gentle tasks are safe to perform (without the sling on) as above
- Avoid holding any heavy item or forceful pushing or pulling with the affected side
- No lifting or supporting body weight with the operated arm
- Avoid reaching behind your body
- Avoid any sudden movements
- No driving in this time

Exercises and movement

- Exercises are demonstrated and explained by the physiotherapist who will see you during the hospital stay. Printed instructions are provided.
- Within the first 4 weeks movements are restricted in range to help the ligaments (capsule) around the shoulder tighten up to assist with joint stability. Do not stretch the arm beyond the limits shown in this period. Usually:
 - Forward flexion to 90 deg. with arm in neutral rotation
 - External rotation to 20 deg.
 - Pendulars

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- Active-assisted exercises (helping move your arm using your other arm or equipment such as a stick or pulley) are permitted
- Perform the exercises shown at least **3 times per day** at home, unless pain prevents this.

The sling is discontinued at 4 weeks

Weeks 4 - 8: Gradual progression of movement and light strengthening

Formal sessions with a community **physiotherapist** should commence at 4 weeks to direct recovery:

- Commence restoration of full movement range
- Movement can be developed in **all directions** to the maximum extent possible
- You may reach behind the back (internal rotation) as an exercise and assist this with the other hand if possible.
- Gentle muscle activation with isometric contraction exercises for deltoid and rotator cuff development
- Use of the arm for simple activities around the home
- Regular home exercising should continue throughout recovery, guided by your physiotherapist

Driving is permitted at this stage if adequate control of the arm is achieved

Weeks 8-12: Further strengthening and activities

Rehabilitation progresses to include:

- Light strengthening exercises using resistance bands (TheraBand)
- Ongoing stretches to push movement range in all directions
- Gradual increase in daily activity use
- Modest lifting at this time (3 kg maximum)

3 to 6 months: Resume normal function

Focus shifts to:

- Improving strength and endurance of the shoulder for return to most activities
- Light weights use in the home or gym as preferred, directed by your physiotherapist
- Heavier lifting permitted (>3 kg)
- Progressing functional activities in the home and outside – return to work and recreational activities as progress allows

Peak range of motion and strength is obtained by 12 months. Formal physiotherapy can cease between 4 and 6 months after surgery depending on progress, however ongoing home exercising is useful to derive maximum benefit.

Maximum range of motion with reverse replacement can be limited, and this may be noticed particularly with reaching behind the back

Your rehabilitation journey

Recovery timelines vary between individuals depending on muscle strength and bone quality, the state of the joint prior to surgery, general health and adherence to rehabilitation guidelines. Recovery is progressive, and following your rehabilitation program is important to support a safe outcome.

Further information about return to activity is found on the page relating to reverse shoulder replacement surgery.