

Joint Benefit:

Shoulder Replacement Improves Motion and Strength for Severe Arthritis and Fractures



Rusty Lutz literally had a chip on his shoulder when he went to see orthopedist Dr. Bruce Wolock. Lutz had been boogie-boarding with his children in Ocean City when he stood up in shallow water, and, suddenly, a six-foot wave came crashing down on him, driving his shoulder into the sand. The result: his shoulder joint suffered multiple fractures, including a bone chip that protruded from the top of the joint.

Lutz received temporary emergency care, but quickly returned home to consult Wolock, whose expertise

includes joint care.

Wolock's first line of treatment was to surgically repair Lutz's fractured shoulder joint, to delay an inevitable shoulder replacement. That repair gave Lutz another five years with his natural shoulder; but then, as Wolock had predicted, Lutz's shoulder joint began to deteriorate. A shoulder replacement was his only option.

About 25,000 Americans have shoulder replacement surgery annually. It is the third most common type of joint replacement surgery because the shoulder "is not subject to the same

heavy wear and tear as the joints of the lower extremities," says Wolock.

Though the major reason for a shoulder replacement is osteoarthritis — the wear-and-tear type of arthritis — other reasons include shoulder fractures and osteonecrosis, in which a decreased blood supply causes the bone to start to die and break down. Osteonecrosis may result from a dislocation or a fracture, which happened to Lutz.

There's no question that our fitness-minded society is taking a blow on its shoulders. "Sports such as racquetball,



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Bruce Wolock, M.D.

tennis, squash, volleyball, as well as the throwing sports like baseball, can take a toll on our shoulders,” explains Wolock.

Shoulder replacement materials are similar to hip and knee replacements. The socket is made of a polymer material, the artificial stem is polyethylene, and the ball is composed of cobalt chrome.

In addition to these state-of-the-art materials, Wolock uses a team approach to manage a joint patient’s care both before and after surgery.

“The two-hour operation is followed by an overnight stay. Most patients return home the next day and begin gentle exercise. Formal physical therapy begins after their first post-operative visit, typically a week later,” explains

Mary Jo Holloran, CRNP, who specializes in orthopaedics and participates in patient care with Wolock.

“The therapy phase takes two to three months, including an intensive PT program to regain strength and range of motion,” says Wolock.

Lutz looks back and agrees it was hard work, but the time and effort paid off. “It’s rewarding to feel as good as Dr. Wolock said I would feel. It was all worth it,” says Lutz.

Reasons for Shoulder Replacement:

- Degenerative joint disease
- Rheumatoid arthritis
- Post-traumatic arthritis
- Unreparable rotator cuff tear with severe arthritis
- Osteonecrosis (bone starts to die and break down)
- Severe fractures

SHOULDERING THE BURDEN OF HEAVY LIFTING

Heavy weightlifting’s popularity has created a phenomenon of shoulder injuries—severe enough to sometimes require shoulder replacements. Dr. Wolock sees lifters whose routine of lifting hundreds of pounds has taken its toll.

“There’s no question that once you’re past your 20s in age, heavy weightlifting puts your shoulders through unnatural stress. As you get older, the body doesn’t repair as easily,” he warns.

He cautions not to lift more than 100 pounds at a time: “Keep weight low and increase the sets and repetitions. Lifters over age 30 or who are not professionals should not lift to failure.”

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