LIVING WITH LUPUS



Shoulder replacement surgery is done to relieve pain and other symptoms that result from damage to the shoulder joint. One of the conditions that can damage the joint is inflammatory disorders. Caused by an overactive immune system, the inflammation can damage the cartilage and the underlying bone in the joint.

Surgery may induce a lupus flare and may cause complications if surgery is performed while having a flare, so it's important to know the status of your lupus before have a procedure. Some people with lupus may have problems with wound healing and are at increased risk of developing infections because of the lupus.

The shoulder joint is made up of three main bones: the upper arm bone (humerus), the shoulder blade (scapula), and the collarbone (clavicle) These bones are connected with ligaments and cartilage, which protects the ends of the bones where they meet. The head of the humerus meets the scapula at the socket (glenoid), forming the joint that allows range of motion of the upper arm and shoulder.

What to expect during the procedure?

The shoulder is opened by cutting one of the front muscles of the rotator cuff, which covers the shoulder. This "opens the door" to allow the surgeon to view and manipulate the damaged parts of the shoulder ball and socket. The damaged sections of the joint are removed. The implant socket, ball and stem components are inserted. The metal ball component is attached to the stem, which extends down inside the humerus. The incision of the rotator cuff muscle is closed and stitched. The external (skin-level) incision is cleaned and stitched. The surgery typically last about 2 hours. Once the dressings and shoulder sling are in place, the patient will have the breathing tube removed.