

Codman Society Patient

L.T.

- HPI:
 - 75 yo female 8 years s/p Right reverse TSA with very good ROM and pain relief initially but with increasing pain and deteriorating function over the past 2-3 years
 - Importantly, she has a left forearm amputation, with a prosthesis, so she uses her right arm for everything.

- Physical Exam (video on next slide):
 - AROM/PROM
 - FF 80/130
 - ER 40, weak but no lag
 - Active IR T8 (note how well preserved on video)



ROM Video

Initial post-op XRs



Current XRs



- New XRs show superior tilt of the scapula with inferior glenoid notching. It does not seem to affect the inferior screw. The anchor has displaced from the greater tuberosity, suggestive of a posterior RTC failure.

Questions

- What is the source of her pain?
 - Painful notching?
 - Poly wear?
 - Component loosening?
- What to do?
 - Nothing?
 - Arthrotomy, poly exchange?
 - Revision reverse TSA
- Concern for losing her great active internal rotation, which is very important due to this being her only functional arm.

- Thank you for your suggestions