

# Complex Reverse Case Discussion



Grant Garrigues, MD  
Section Head, Shoulder Reconstruction  
Duke University Medical Center



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Duke Sports Medicine

## Disclosures

- Consultant: DJO/Encore; Tornier/Wright
- Education/Fellowship funding: Arthrex; Breg; Smith & Nephew
- Research/Cadaver Funding: DePuy-Synthes; DePuy-Mitek; Stryker

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Duke Sports Medicine

## Case 1: "What you see is what you get"

- 72 yo male
- 3 months post RSA
- "Doc, Its been out more than its been in!"



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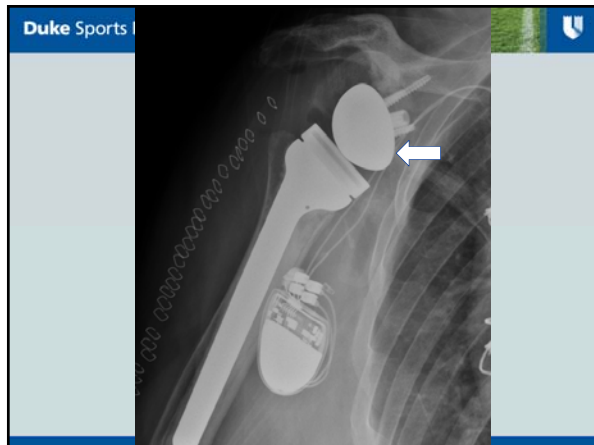
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**Duke Sports Medicine**

### Case 1: Discussion

- Revised with *deltopic* approach, larger sphere, thicker liner, baseplate replaced--inferior position and inferior tilt
- Superior approach?
  - Who, what, when, where, why, how?
- What do you do about the "trampoline" of inferior tissue with Ax nerve underneath?
- This system has no lateralized sphere, how do you feel about mixing systems?

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Duke Sports Medicine

### Superior Approach

- Only consider if
  - ✓ High riding head is reducible
  - ✓ No medial osteophytes
  - ✓ Primary surgery
  - ✓ >30 degrees ER
- Make sure you get low
- Axillary nerve in play...twice!
- *Gillespie RJ Ortho Clin N America, 2014.*

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### Case 2: "The cursory internet search"

- 67 yo 5 years s/p anatomic TSA
- Pain, weakness, pseudoparalysis
- "its never been right but its getting worse"
  
- "I did a very thorough internet search and I understand you can help me"

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### Case 2: "The cursory internet search"



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### Case 2: "The cursory internet search"



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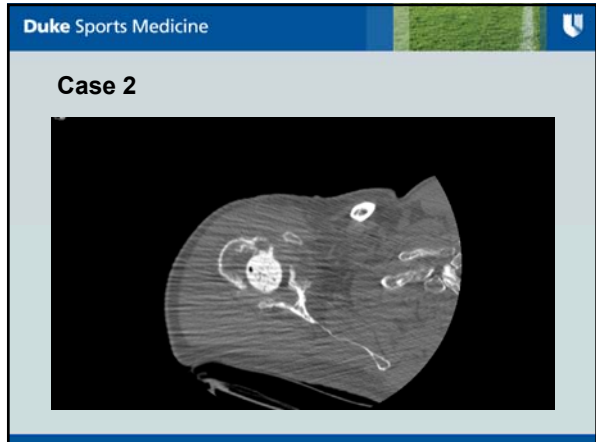
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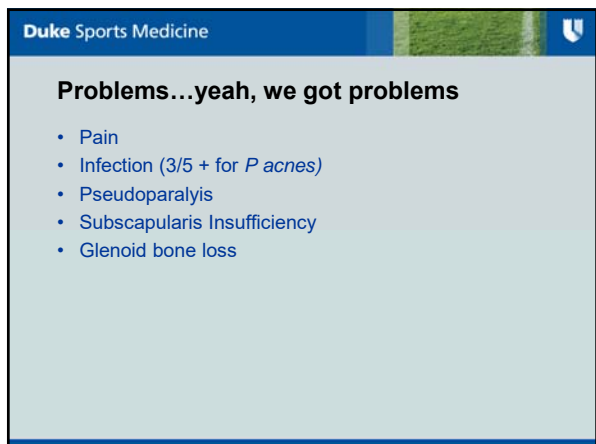
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### Options

- A. He's doomed. Leave him with antibiotic spacer and flail shoulder. At least the infection is at bay.
- B. Revision to hemi, bone graft glenoid, pec transfer
- C. Revision to anatomic TSA, implant glenoid on top of ICBG graft to glenoid, pec transfer
- D. Reverse with allograft to glenoid
- E. Reverse with autograft to glenoid

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### Shoulder surgeon = Large animal vet?



Like most veterinary students, Doreen breezes through chapter 9.

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### Shoulder surgeon = Large animal vet?



Like most veterinary students, Doreen breezes through chapter 9.

- Unstable prosthesis
  - Reverse
- Absent rotator cuff
  - Reverse
- Loss of proximal humerus
  - Reverse
- Poor glenoid bone stock
  - Reverse
  - (with bone graft)

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**Case: Revision to RSA with ICBG**



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**Case: Revision to RSA with ICBG**



- Beach chair less elevated than normal
- Bump under ipsilateral hip
- Now I just prep out the entire flank and shoulder

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**Case: Revision to RSA with ICBG**



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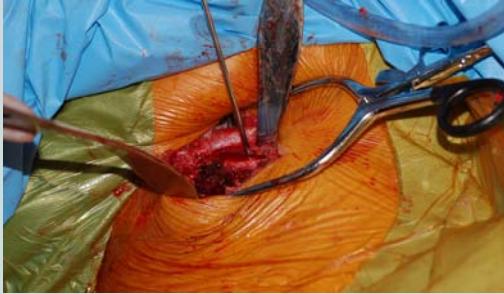
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**Case: Revision to RSA with ICBG**



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**Case: Revision to RSA with ICBG**



• Pelvic Tuberculum

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**Case: Revision to RSA with ICBG**



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**Case: Revision to RSA with ICBG**



- Long-post base plate
- Line up locking screw holes with iliac crest

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**Case: Revision to RSA with ICBG**



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**Case: Revision to RSA with ICBG**



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**Case: Revision to RSA with ICBG**



- "Doughy" cement for template
- Impression in cement for orientation

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**Case: Revision to RSA with ICBG**



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**Case: Revision to RSA with ICBG**



- Match template
- 1 cm of baseplate for native bone

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