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Reverse total shoulder arthroplasty for complex proximal humerus fractures in elderly patients

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Proximal humerus fractures are common injuries in elderly patients. While certain proximal humerus fractures may be amenable to nonoperative conservative management, complex 3- and 4-part proximal humerus fractures often require surgical intervention. Decisions about surgical intervention may be influenced by fracture comminution, osteopenic bone, and medical comorbidities. Open reduction and internal fixation or shoulder hemiarthroplasty may be considered as they have been shown to provide reliable pain relief; however, they have variable outcomes in regard to shoulder motion, strength, and overall function. Reverse total shoulder arthroplasty may be a useful alternative to open reduction and internal fixation or shoulder hemiarthroplasty in elderly patients older than 70 years with significant fracture comminution or osteopenic bone. Surgical indications, technique, and potential complications must be considered. Early results suggest that reverse total shoulder arthroplasty may provide reliable pain relief and improved shoulder motion and overall function compared to hemiarthroplasty.

Biography

James A Tom is an Assistant Professor of Orthopaedic Surgery at the Drexel University College of Medicine, Philadelphia, PA, USA. He is also the Team Orthopaedic Surgeon for Drexel University Athletics. He is fellowship-trained in orthopaedic sports medicine and shoulder surgery.

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