

# Reversing the Damage

## Breakthrough in Shoulder Surgery Brings New Hope to Patients

All her life, Millie has been active – raising six children, bowling in a league, even skating in the roller derby 60 years ago. But when the 81-year-old from Chantilly began experiencing difficulty raising her arms to complete simple tasks such as brushing her hair or reaching up to a shelf, she knew something was wrong. Her limited range of motion also made it hard to do her office job at Louise Archer Elementary School in Vienna.

Millie consulted Commonwealth surgeon David Novak, MD, who diagnosed advanced osteoarthritis in both her shoulders. When several months of cortisone shots failed to alleviate her symptoms, she opted for a total shoulder replacement on her left side.

This procedure involves replacing the arthritic joint surfaces with a metal and plastic implant. The components come in various sizes and are either cemented or press fit into the bone. “Patients like Millie, with end-stage arthritis and intact rotator cuff tendons, who no longer respond to conservative treatment – such as NSAIDs, cortisone or physical therapy – are generally good candidates for total shoulder replacement,” Dr. Novak explains.

The surgery restored function to Millie’s left shoulder and she was able to use that arm to drive and perform basic activities at work. But within a year she had returned to Dr. Novak with worsening symptoms on her right side. This time, standard total shoulder replacement was not an option; the damage was too severe. Dr. Novak suggested something different: reverse total shoulder replacement.

This exciting breakthrough in shoulder surgery is a new treatment option for patients whose conditions previously had no solution. In a reverse total shoulder replacement, the socket and metal ball are switched. Afterwards, patients use their deltoid muscle, instead of their rotator cuff, to lift their arm overhead. Candidates for reverse total shoulder replacement include patients with unreparable rotator cuff tears, no range of motion in the shoulder joint and severe shoulder fractures.



After a shoulder replacement, Millie is back to the job she loves at Louise Archer Elementary School.

Dr. Novak is among just a handful of surgeons in the area who perform this advanced procedure.

Following both of her surgeries, Millie wore a sling for four weeks. She spent two months working with a physical therapist on exercises to regain range of motion and strengthen her shoulder joint. It was all part of a rigorous rehabilitation program that every patient goes through.

“Recovery from shoulder replacement surgery can range anywhere from three to six months, depending on the patient and the type of procedure performed,” says John McConnell, MD, a Commonwealth surgeon whose areas of specialization include total joint replacement and sports medicine. “Generally, patients are able to resume an active lifestyle, including most sports, with some restrictions on overhead activities.”

Motion and strength are back in both of Millie’s shoulders and she’s able to perform the simple, everyday activities she couldn’t do before, such as holding a hairdryer over her head or reaching up to sort the mail at work.

She praises Dr. Novak’s skill and is grateful to have a resource such as Commonwealth Orthopaedics close to home. “Dr. Novak always

took the time to clearly explain everything that was going on, he visited me in the hospital and he took excellent care of me,” she says. “I just think he’s the best, and everyone at Commonwealth, too. They were all very good to me.”



**John P. McConnell, MD**, earned a BS in Chemistry from Georgetown University in Washington, DC, and also received his medical degree from Georgetown University Medical School. He then completed a general surgery internship at Northshore University Hospital in Long Island, New York, and returned to Washington to do an orthopaedic surgery residency at Georgetown University Medical Center.



**David J. Novak, MD**, earned a BA in Economics from the University of Pennsylvania and received his medical degree from Georgetown University. He remained in Washington, DC, at Georgetown University Medical Center to complete a residency in orthopaedic surgery. He then completed advanced fellowship training in sports medicine and arthroscopy at the Southern California Orthopedic Institute in Van Nuys, California.

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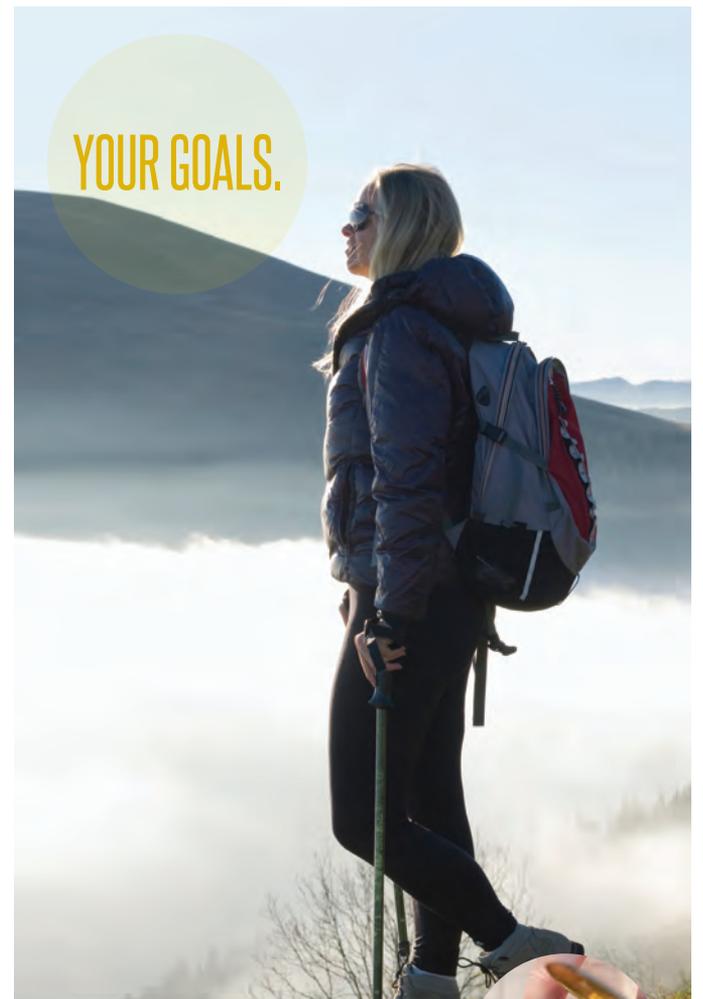
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