



Anaesthesia for Shoulder Joint Replacement Surgery

If you need to undergo shoulder joint replacement surgery, preparation will help to ensure that the experience is a positive one.



This pamphlet will:



Provide you with general information about anaesthesia for shoulder joint replacement surgery



Encourage you to ask questions of your anaesthetist



Help you approach the planned procedure positively

If you have any further questions, you should ask your specialist or relevant health professional.



Types of surgery

Joint replacement surgery is a common and effective procedure for relieving severe joint pain and loss of function. The most common types of shoulder replacement surgery include anatomic total shoulder replacement, reverse total shoulder replacement and partial shoulder replacement.

and health specialists before your surgery. Although these tests and investigations may delay your surgery, having you in the best condition prior to surgery is crucial to a successful outcome and to your long-term health. Sometimes there may be a delay between your consultation and the date of your surgery. You must notify your anaesthetist if you develop any new medical conditions during this time.



You are in good hands

Australia is one of the safest places in the world to have an anaesthetic. Specialist anaesthetists in Australia are highly trained medical specialists. They have gone to medical school, completed an internship and spent at least five years undergoing specialist anaesthetic training. Training includes anaesthesia, pain management, resuscitation and the management of medical emergencies.



Your medications

Most medications can continue up until surgery. Blood thinners and diabetic medication require special consideration and you will be given specific instructions on what to do with these medications. If you are unsure, please ask your surgeon or your anaesthetist.



Before the surgery

Your anaesthetist will want to know about your medical history. This may include seeing them in their rooms or a telehealth consultation before the date of your surgery. You might need further tests or consultations with other medical



Preparation

Before your surgery, you will need to fast and not consume food or clear liquids. Generally, this is no food six hours prior to surgery and no clear liquids for two hours, however your anaesthetist will discuss this with you before the procedure.





What to expect

Most shoulder replacement surgeries can be performed with a regional anaesthetic or a combination of regional and general anaesthesia. The type of anaesthesia is heavily dependent on the type of surgery, but also the preference of the anaesthetist or the patient.

Regional Anaesthesia: A regional anaesthetic or 'nerve block' involves injecting numbing medicine around a nerve or group of nerves. A nerve block is usually done to provide you with pain relief after surgery. It is possible to do surgery only with a nerve block. In this case, you will be awake but feel no pain.

General Anaesthesia: General anaesthesia is what people describe as 'going to sleep'. The anaesthetist will insert a cannula into your vein and attach fluids (a drip). Before going under a general anaesthetic, you will usually be asked to breathe oxygen through a mask. Anaesthetic medications are usually given through the cannula to start the anaesthetic. Once you are fully 'asleep' a breathing tube will be placed in your windpipe to help with your breathing during surgery. Your anaesthetist will keep you 'asleep' and monitor you during the entire operation. It is normal to feel drowsy as you wake up.

Sometimes extra monitoring needs to be used, such as an arterial line. An arterial line is a special type of cannula that is inserted into an artery and is usually used to closely monitor your blood pressure during and after surgery. A urinary catheter, which drains your bladder may also be placed. These extra lines may be inserted once you have been anaesthetised.

At the end of the operation your anaesthetist will transport you to the recovery room where you will be cared for by specially trained nursing staff. You will stay here until you are comfortable, and it is safe for you to go to the ward.



Post-Surgery

It is normal to feel drowsy as you wake up. If you have had a regional anaesthetic, you might notice that your arm or part of your arm is numb or cannot be moved. This is normal.

Rarely, the side of your face may also be numb, and the muscles may not work properly. This will pass. You may also experience some discomfort, pain or nausea. There will often be medications to treat these given to you on a regular basis. If they are not improving your pain or nausea, please ask your nurse for extra medication. You may also notice a dry or sore throat or have a headache. However, this usually passes in 1-2 days.

Generally, you can expect to stay in hospital one to three days after surgery. Please confirm this with your surgeon and/or anaesthetist before you have surgery. If you have had sedation or a general anaesthetic and are returning home on the day of the surgery, you must have an adult with you for 24 hours after the procedure. For safety reasons it is important that you refrain from the following for up to 24 hours after receiving the anaesthetic: drinking alcohol, driving a car, operating machinery.



Risks to be aware of

Major complications with anaesthesia for shoulder joint replacement surgery are uncommon when anaesthesia is administered by a specialist anaesthetist.

Minor risks can include bruising, fatigue, sore throat, headache, sleep disturbances afterwards, drowsiness, muscle pains, nausea and vomiting. Blood thinners and diabetic medication require special consideration and you will be given specific instructions on what to do with these medications. If you are unsure, please ask your surgeon or your anaesthetist.

While extremely rare, serious side effects such as severe allergic reaction, severe bleeding, heart attack, stroke, seizure, lung damage, pneumonia, damage to the vocal cords or infection exist. Remember that the risks of these more serious complications, including death, are very rare.

You are encouraged to ask your anaesthetist any questions you may have. They will be more than happy to answer them and discuss the best and safest plan for you and your surgery.

This pamphlet provides general information about anaesthesia for hip and knee replacement surgery. It is not a substitute for advice provided by your specialist about your personal treatment plan. Every effort is made to ensure that the information is accurate and up to date. However, we do not guarantee or warrant the accuracy or completeness of the information provided. This information may change with time due to advancements in clinical research and knowledge. Use this pamphlet only in consultation with your specialist. We prefer our members to link to our website rather than print or republish our materials on your own website to ensure you have access to the most up-to-date version. For the latest version please visit the ASA Website. Last reviewed 12/03/24.

