Fast track rehabilitation after reversed total shoulder arthroplasty

No registrations found.

Ethical review	Not applicable
Status	Recruiting
Health condition type	-
Study type	Observational non invasive

Summary

ID

NL-OMON25527

Source
Nationaal Trial Register

Brief title
Fast track rTSA

Health condition

shoulder complaints based on omarthrosis, rotator cuff arthropathy, avascular necrosis and (late) post traumatic

Sponsors and support

Primary sponsor: Board of directors Dijklander Ziekenhuis
Source(s) of monetary or material Support: None

Intervention

Outcome measures

Primary outcome

The primary study parameter is the difference in Oxford Shoulder Score (OSS) from preoperative to 6 weeks postoperative.

Secondary outcome

Secondary study parameters are:
1. Difference in (ROM), VAS pain scores in rest and during activity and the quality of life (EQ-5D) from preoperative to 6 weeks postoperative.
2. Difference in OSS, (ROM), VAS pain scores in rest and during activity and the quality of life (EQ-5D) from preoperative to 3 months postoperative
3. Difference in OSS, (ROM), VAS pain scores in rest and during activity and the quality of life (EQ-5D) from preoperative to 1 year postoperative
4. Complications and re-admissions until 1 year postoperative.
5. Society costs including healthcare costs, patient and family costs and lost productivity costs.

Study description

Background summary

In the Dijklander hospital and St Anna hospital, the technique without reattachement of the subscapularis tendon during surgery for a reversed shoulder prosthesis (rTSA) has been used for the last few years with excellent results. The rTSA being used has been designed to increase stability. Without the need to reattach the subscapularis tendon and the stability provided by the rTSA patients mobilization can start directly postoperative, providing improved range of motion (ROM) and an increased independent daily life. When patients start mobilization immediately post-operative and immobilization will not be necessary, we expect them to be less dependent on care of a district nurse or family members. Also a faster recovery is expected with an increased shoulder function and self-reported functional outcome on short term.

Study objective

When patients start mobilization immediately post-operative and immobilization will not be necessary, we expect them to be less dependent on care of a district nurse or family members. Also a faster recovery is expected with an increased shoulder function and self-reported functional outcome on short term.

Study design

Preoperative, and 6 weeks, 3 months and 1 year postoperative

Intervention

not applicable

Contacts

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Eligibility criteria

Inclusion criteria

• 50 years and older
• Selected for rTSA surgery
• Complete understandig of the study and signed informed consent

Exclusion criteria

• Selected for rTSA with the indication of fracture treatment after an acute trauma
• Individuals who are unable to follow an intense mobilization program.
• Individuals who are unable to complete the PROMs questionnaires.

Study design

Design

Study type:	Observational non invasive
Intervention model:	Other
Allocation:	Non controlled trial
Masking:	Open (masking not used)
Control:	N/A , unknown

Recruitment

NL

Recruitment status:	Recruiting
Start date (anticipated):	01-04-2019
Enrollment:	50
Type:	Anticipated

IPD sharing statement

Plan to share IPD: Undecided

Ethics review

Not applicable

Application type:	Not applicable

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register	ID
NTR-new	NL7656
Other	METC VUmc : METC VUmc 2019.111

Study results