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Titolo	Reverse Shoulder Arthroplasty : Biomechanics, Clinical Techniques, and Current Technologies / / edited by Mark Frankle, Scott Marberry, Derek Pupello
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Nota di bibliografia	Includes bibliographical references at the end of each chapters and index.
Nota di contenuto	Part I: History of Reverse Shoulder Arthroplasty -- Origins of Reverse Shoulder Arthroplasty and Common Misconceptions -- Part II: Biomechanics and Basic Science of Selected Leading Research Centers -- Shoulder Biomechanics: Charité University of Medicine, Berlin, Germany -- Biomechanics of the Reverse Shoulder Arthroplasty -- Reverse Shoulder Biomechanics: The Research Performed at the Foundation for Orthopaedic Research and Education (FORE) -- Design Optimization and Prosthesis Classification: Bordeaux-Merignac Sport Clinic, Bordeaux-Merignac, France -- Motion and Muscular Function after Reverse Shoulder Arthroplasty -- Biomechanics of the Normal and Reverse Shoulder -- Biomechanics of the Reverse Total Shoulder Replacement: The Hospital for Special Surgery Perspective -- Analysis of Reverse Total Shoulder Arthroplasty Biomechanics Using a Dynamic Shoulder Simulator -- Biomechanics of Reverse Shoulder Arthroplasty: Contribution of Computer Modelling -- Kinematic Analyses of Patients with Reverse Shoulder Arthroplasty -- Implant Retrieval: Drexel University, Philadelphia, Pennsylvania, USA -- Part III: Clinical Uses -- Reverse Shoulder Arthroplasty for Massive Rotator Cuff Tears Without

Glenohumeral Arthritis -- Massive Rotator Cuff Arthropathy with Glenohumeral Arthritis -- Intact Rotator Cuff -- Reverse Shoulder Arthroplasty in the Setting of Proximal Humeral Fracture -- Reverse Shoulder Arthroplasty in the Setting of Scapula Fractures -- RSA with Glenoid Bone Loss -- Reverse Shoulder Arthroplasty in Patients with Preoperative Deltoid Impairment -- Reverse Total Shoulder Arthroplasty in the Setting of Infection -- Reverse Shoulder Arthroplasty in the Setting of Proximal Humeral Bone Loss -- Conversion of Failed Hemiarthroplasty to Reverse Total Shoulder Arthroplasty: Indications, Techniques, and Outcomes -- Reverse Prosthesis and the Failed Total Shoulder Arthroplasty -- Revision Reverse Total Shoulder Arthroplasty -- Proximal Humerus Tumors -- Massive Irreparable Rotator Cuff Tears: How to Rebalance the Cuff-Deficient Shoulder? -- Influence of Arm Lengthening in Reverse Shoulder Arthroplasty -- How to Handle the Humeral Side -- Rehabilitation and Activity Expectations following RSA -- Complications Associated with RSA -- Part IV: Current Industry Devices and Surgical Techniques -- Arthrex Univers Revers™ Shoulder Prosthesis -- Aston Medical Duocentric® Reversed Prosthesis: Proposition of New Glenoid Component Design to Prevent Scapular Neck Notching -- The Biomet Comprehensive© Reverse Total Shoulder System: Design Considerations and Surgical Techniques -- Depuy Synthes: Joint Reconstruction: DELTA XTEND Reverse Shoulder Prosthesis -- DJO Surgical Reverse™ Shoulder Prosthesis (RSPTM) -- Design Features and Surgical Technique of The Scultra II Reverse Prosthesis -- Evolutis UNIC Reverse Shoulder Prosthesis -- Exactech Equinoxe RTSA Platform Shoulder System Design Rationale -- FH Orthopedics Arrow Universal Shoulder Prosthesis -- Verso® Stemless Bone Preserving Reverse Geometry Total Shoulder Replacement: (Innovative Design Orthopaedics Ltd.) -- The Integra® Titan™ Reverse Shoulder System -- The SMR ® Shoulder System of Lima Corporate. - Mathys Affinis® Inverse -- The Bayley/Walker Prosthesis: Stanmore Implants Worldwide -- Tornier Aequalis AscendTM Flex Convertible Shoulder System -- Zimmer Reverse Total Shoulder Arthroplasty -- Part V: Economic Value -- Value and Reverse Total Shoulder Arthroplasty: The Foundation for Orthopaedic Research and Education Perspective -- Value and Reverse Total Shoulder Arthroplasty: The Boston Shoulder Institute Perspective.

Sommario/riassunto

Focusing exclusively on reverse shoulder arthroplasty (RSA) techniques and devices, this plentifully illustrated text covers all aspects of this important and innovative treatment for shoulder pain and dysfunction. The book begins with a history of RSA followed by a thorough overview of the basic science and biomechanics of the shoulder. Indications for and clinical applications of RSA in a number of surgical interventions are then described, including the revision of failed shoulder arthroplasty, setting in cases of glenoid and humeral bone loss and rotator cuff tears. A whole section is then dedicated to various commercial devices with descriptive expert analysis of the design and implementation of each. An examination of the current economic value of RSA, including cost effectiveness and expected cost outcomes, comprises the final section. Reverse Shoulder Arthroplasty can therefore be read either from start to finish, allowing orthopedic surgeons to appreciate the various perspectives offered, or by selecting specific topics of interest much like a "how-to manual" of either a particular device design or the treatment of a specific pathology.
