

A PATIENT EDUCATION GUIDE:

TOTAL ELBOW ARTHROPLASTY (TEA)

This is a *brief* overview of what you, the patient, should know about getting a **Total Elbow Arthroplasty**. If you have any questions, please write them down and bring them to your next consultation so Dr. Kassam can go through them with you in detail.

Why do I need a Total Elbow Arthroplasty (TEA)?

There are several reasons why you may require an elbow arthroplasty (remember: arthroplasty is just another word for replacement). Dr. Kassam will go through your specific case in detail at your consultation. Some common reasons are:

Rheumatoid Arthritis

This is one of the most common reasons that patients have an elbow replacement. Normal cartilage helps maintain pain free motion and arthritis is the progressive destruction of that joint cartilage. There are different types of arthritis. Rheumatoid arthritis is caused by a medical condition where your immune system mistakenly attacks your own tissue, particularly the lining of the joints. **This can cause inflammation and erosion of the joint surface.** A TEA, replaces this diseased joint with metal and plastic to help regain mobility and reduce pain.

Osteoarthritis

Osteoarthritis can be thought of as “wear and tear” of the joint surface and cartilage. When the cartilage wears down, the space between joint becomes smaller. Without the cartilage lining, bone on one side of the joint begins to rub on the other side of the joint. This can cause pain, deformity, swelling and decrease your range of motion. Patient’s may also get a sensation of “loose pieces” or “crackling and popping” in the joint. **Severe osteoarthritis is less common in the elbow than other joints, however, TEA is still a viable choice for those patients who exhausted other treatment options.**

Fracture

Elbow fractures or “breaks” can sometimes be fixed with plates and screws. However, if someone has a fracture that is beyond repair, are of an advanced age or has a medical condition that can severely affect bone healing, an elbow replacement is a good option. This will allow for better function and decrease the likelihood of needing multiple operations in the future. **Multiple studies have suggested, that in an older population with severe fractures, patients with TEA’s actually do better than with fixing the fracture with plates and screws.**

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What is a Total Elbow Arthroplasty (TEA)?

Total Elbow Arthroplasty's are designed to **recreate the normal anatomy and position of your original joint with a combination of metal and plastic.**

Generally, the bony ends of the joint are replaced with metal and are separated by a plastic insert. If you have any known allergies to metals, such a nickel, please inform Dr. Kassam as he may be able to find an alternative for you.

The metal ends are attached to "stems", which are extensions of metal that insert into the arm bone (the humerus) and one of the forearm bones (the ulna) respectively. These stems are usually secured into the bone with bone cement. The plastic insert acts as a hinge between the two metal components. The humeral metal component has a "phalange" or metal extension on the front which increases stability and helps control rotation.

While TEA's can offer substantial benefits to patients, there are certain restrictions to be aware of. **After a TEA, you can not lift more than 5-8 lbs with that arm for the lifetime of the prosthesis.** While this may initially sound very restrictive, **the benefits of pain relief and increase in motion often outweigh the downside of this problem.**

Below are two x-rays showing what a TEA looks like on an **AP a.k.a. front to back view (Left)** and a **Lateral a.k.a. side view (Right).**



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What should I expect when I have surgery?

The Day Before Surgery

- You will receive a call from the hospital before surgery telling you what time you should arrive. It is normal to arrive several hours ahead of your scheduled time to allow for the check in process.
- **Do not eat or drink anything after midnight the night before surgery.** This includes water. You may take sips of water to swallow pills if required and cleared by your medical team. **Your surgery may need to be cancelled if you do not adhere to these instructions.**

The Morning of Surgery

- Arrive to the hospital at your instructed time.
- If possible, arrive with a family member or friend who can assist with your check-in and help you remember any last-minute questions. There will be a place for family and friends to wait while you are in surgery.
- A nurse will check you in.
- The anesthesia team will meet with you to discuss their plan for anesthesia during surgery and will be able to answer any questions you may have for them.

After Surgery

Hospital Stay

- **Most of our patients stay one night in the hospital.**
- During this time your nurse and anaesthesia team will help to manage your post-operative pain. It is important to know that you will have some pain, but the medications should help make your pain manageable.
- You will also meet with our Occupational or Physical Therapist who will review exercises you can do after surgery. **Your elbow will be a plaster splint so these may be limited initially.**
- A Care Coordinator can be available to help, if you need any other services when you are discharged home.

Home

- Wear your sling at all times except for bathing and doing your exercises demonstrated by the therapist.
- Keep your plaster splint dry. This may require covering it with a plastic wrap while bathing or taking sponge baths.
- **Do not use your operative arm to carry or lift anything.** Do not use your operative arm to push yourself up from a chair or when getting off the toilet.
- **No driving while using your sling and while you are taking your narcotic pain medications.**
- Do your best to wean off your pain medications.
- Many people are most comfortable sleeping in a more up-right position after surgery. You can opt to sleep in a recliner or prop yourself up on pillows in bed.
- If you received an ice machine please use as instructed to help reduce swelling. You may also use ice packs or bags. Do not use for longer than directed and always avoid direct skin contact.

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Follow up

- **Your first follow up appointment is usually 7-10 days following surgery.**
- At this visit we will discuss your progress, take x-rays and check your incision. We will likely change you out of your plaster splint into a bandage dressing. We will usually leave your sutures/staples in, until the following visit.
- We will determine if you are ready for outpatient physical therapy.
- If you are able to start physical therapy you will be given a referral with the specific instructions both you and your therapist should follow.

I hope this has helped clarify some of your questions surrounding **Total Elbow Arthroplasty**. As always, do not hesitate to ask questions and schedule a follow up appointment should you require any further discussion.

Best,



Hafiz F. Kassam MD, FRCSC



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