

Supplementary Table 1. List of included articles

Title	Author	Year	Study design	Journal	Global lateralization	Subscapularis management	Total* MINORS score or study type if not retrospective
Does lateralisation of the centre of rotation in reverse shoulder arthroplasty avoid scapular notching? Clinical and radiological review of one hundred and forty cases with forty five months of follow-up [27]	Katz D, Valenti P, Kany J, Elkholti K, Werthel JD.	2016	Case series; retrospective	Int Orthop	VHL	Tenotomy	12/16
Difficulty in performing activities of daily living associated with internal rotation after reverse total shoulder arthroplasty [28]	Kim MS, Jeong HY, Kim JD, Ro KH, Rhee SM, Rhee YG.	2020	Case series; retrospective	J Shoulder Surg	M	Peel	13/16
Uncemented versus cemented humeral stem fixation in reverse shoulder arthroplasty [29]	King JJ, Farmer KW, Struk AM, Wright TW.	2015	Cohort; prospective	Int Orthop	L	Not Repaired	Prospective cohort
Grammont humeral design versus onlay curved-stem reverse shoulder arthroplasty: comparison of clinical and radiographic outcomes with minimum 2-year follow-up [30]	Merolla G, Walch G, Ascione F, et al.	2018	Cohort; retrospective	J Shoulder Surg	L/M	LTO/Tenotomy	23/24
Reverse total shoulder arthroplasty for primary glenohumeral osteoarthritis in patients with a biconcave glenoid [31]	Mizuno N, Denard PJ, Raiss P, Walch G.	2013	Cohort; retrospective	J Bone Joint Surg Am	M	Tenotomy	16/16
Outcomes of staged bilateral reverse shoulder arthroplasties for rotator cuff tear arthropathy [33]	Morris BJ, Haigler RE, O'Connor DP, Elkousy HA, Gartsman GM, Edwards TB.	2015	Cohort; retrospective	J Shoulder Surg	M	Not Repaired	19/24
Glenosphere size in reverse shoulder arthroplasty: is larger better for external rotation and abduction strength? [34]	Müller AM, Borm M, Jung C, et al.	2018	Cohort; retrospective	J Shoulder Surg	M	Tenotomy	14/16
Do individualized humeral retroversion and subscapularis repair affect the clinical outcomes of reverse total shoulder arthroplasty? [35]	Oh JH, Sharma N, Rhee SM, Park JH.	2020	Cohort; retrospective	J Shoulder Surg	HL	Tenotomy/Repaired	14/16
Reverse shoulder arthroplasty after failed pectoralis major tendon transfer with a minimum follow-up of 5 years: a case series [36]	Ortmaier R, Plachel F, Lederer S, et al.	2016	Case series; retrospective	J Orthop Sci	M/ML	Not Repaired	13/16
Obesity has minimal impact on short-term functional scores after reverse shoulder arthroplasty for rotator cuff tear arthropathy [32]	Morris BJ, Haigler RE, Cochran JM, et al.	2016	Cohort; retrospective	Am J Orthop (Belle Mead NJ)	M	Repaired	12/16
A comparison of concentric and eccentric glenospheres in reverse shoulder arthroplasty: a randomized controlled trial [37]	Poon PC, Chou J, Young SW, Astley T.	2014	Randomized control trial	J Bone Joint Surg Am	M	Tenotomy	Randomized control trial
Effects of humeral component retroversion on functional outcomes in reverse total shoulder arthroplasty for cuff tear arthroplasty [38]	Rhee YG, Cho NS, Moon SC.	2015	Cohort; retrospective	J Shoulder Surg	M	LTO	14/16
Impact of previous rotator cuff repair on the outcome of reverse shoulder arthroplasty [39]	Sadoghi P, Vavken P, Leithner A, et al.	2011	Case-control; retrospective	J Shoulder Surg	M	LTO	13/16
Outcome and value of reverse shoulder arthroplasty for treatment of glenohumeral osteoarthritis: a matched cohort [40]	Steen BM, Cabezas AF, Santoni BG, et al.	2015	Cohort; retrospective	J Shoulder Surg	L	LTO	23/24
The TESS reverse shoulder arthroplasty without a stem in the treatment of cuff-deficient shoulder conditions: clinical and radiographic results [41]	Teissier P, Teissier J, Kouyoumdjian P, Asencio G.	2015	Case series; retrospective	J Shoulder Surg	L	Spared	12/16

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Supplementary Table 1. Continued

Title	Author	Year	Study design	Journal	Global lateralization	Subscapularis management	Total* MINORS score or study type if not retrospective
Reverse total shoulder arthroplasty using a trabecular metal glenoid base plate: functional and radiological outcomes at two to five years [42]	Theivendran K, Varghese M, Large R, et al.	2016	Cohort; retrospective	Bone Joint J	ML	Peel	16/16
The effect of current and former tobacco use on outcomes after primary reverse total shoulder arthroplasty [43]	Walters JD, George LW 2nd, Walsh RN, et al.	2020	Cohort; retrospective	J Shoulder Surg	HL	Tenotomy	14/16
Clinical and radiographic results of cementless reverse total shoulder arthroplasty: a comparative study with 2 to 5 years of follow-up [44]	Wiater JM, Moravek JE Jr, Budge MD, Koueiter DM, Marcantonio D, Wiater BP.	2014	Cohort; retrospective	J Shoulder Surg	ML/M	Tenotomy	20/24
Outcomes of reverse shoulder arthroplasty using a mini 25-mm glenoid baseplate [13]	Athwal GS, Faber KJ.	2016		Int Orthop	M	Peel	12/16
Results of a stemless reverse shoulder prosthesis at more than 58 months mean without loosening [14]	Ballas R, Béguin L.	2013	Case series; retrospective	J Shoulder Surg	L	Tenotomy	14/16
The lateralization and distalization shoulder angles are important determinants of clinical outcomes in reverse shoulder arthroplasty [15]	Boutsiadis A, Lenoir H, Denard, P. J., Panisset, J. C., Boutsiadis A, Lenoir H, Denard PJ, et al.	2018	Cohort; retrospective	J Shoulder Surg	M/L/ML/HL	Tenotomy/Repaired	15/16
Health-related quality of life and functionality after reverse shoulder arthroplasty [16]	Castricini R, Gasparini G, Di Luggo F, De Benedetto M, De Gori M, Gaiasso O.	2013	Cohort; prospective	J Shoulder Surg	M	Not Repaired	Prospective cohort
Pre-operative factors influence the recovery of range of motion following reverse shoulder arthroplasty [18]	Collin P, Matsukawa T, Denard PJ, Gain S, Lädermann A.	2017	Cohort; prospective	Int Orthop	M	Tenotomy	Prospective cohort
Mid-term results of reverse shoulder arthroplasty for glenohumeral osteoarthritis with posterior glenoid deficiency and humeral subluxation [17]	Collin P, Hervé A, Walch G, Boileau P, Muniandy M, Chelli M.	2019	Cohort; retrospective	J Shoulder Surg	M	Tenotomy/Peel	13/16
Anatomic Total Shoulder Arthroplasty Versus Reverse Total Shoulder Arthroplasty for Post-Capsulorrhaphy Arthropathy [20]	Cuff DJ, Santoni BG.	2018	Cohort; retrospective	Orthopedics	L	Peel	18/24
Reverse shoulder arthroplasty in the weight-bearing versus non-weight-bearing shoulder: mid-term outcomes with minimum 5-year follow-up [19]	Cuff DJ, Santoni BG.	2018	Cohort; retrospective	Orthopedics	L	Repaired	18/24
Reverse total shoulder arthroplasty: radiological and clinical result using an eccentric glenosphere [21]	De Biase CF, Delcogliano M, Borroni M, Castagna A.	2012	Cohort; retrospective	Musculoskelet Surg	M	Spared	12/16
Outcomes of reverse shoulder arthroplasty using a short stem through a superolateral approach [22]	Dukan R, Bahman M, Rousseau MA, Boyer P.	2020	Cohort; retrospective	J Shoulder Surg	L	Spared	12/16
Reverse prostheses in arthroplasties with cuff tear: are survivorship and function maintained over time? [23]	Favard L, Levigne C, Nerot C, Gerber C, De Wilde L, Mole D.	2011	Cohort; retrospective	Clin Orthop Relat Res	M	Repaired	14/16

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Supplementary Table 1. Continued

Title	Author	Year	Study design	Journal	Global lateralization	Subscapularis management	Total* MINORS score or study type if not retrospective
Clinical results of bony increased-offset reverse shoulder arthroplasty (BIO-RSA) associated with an onlay 145° curved stem in patients with cuff tear arthropathy: a comparative study [24]	Franceschetti E, Ranieri R, Giovanetti de Sanctis E, Palumbo A, Franceschi F.	2020	Cohort; retrospective	J Shoulder Surg	L	Tenotomy	21/24
Massive irreparable rotator cuff tear and associated deltoid tear. Does the reverse shoulder arthroplasty and deltoid repair be a possible option of treatment? [25]	Garofalo R, Flanagan B, Castagna A, Calvisi V, Krishnan SG.	2016	Cohort; retrospective	J Orthop Sci	M	Peel	13/16
Can a functional difference be detected in reverse arthroplasty with 135° versus 155° prosthesis for the treatment of rotator cuff arthropathy: a prospective randomized study [26]	Gobezie R, Shishani Y, Lederman E, Denard PJ.	2019	Randomized control trial	J Shoulder Surg	ML	Peel	Randomized control trial

MINORS: methodological index for non-randomized studies, VHL: very highly lateralized, M: medialized, ML: minimally lateralized, L: lateralized, HL: highly lateralized, LTO: lesser tuberosity osteotomy.

*Comparative studies are out of a maximum of 24 points. Non-comparative studies are out of a maximum 16 points.