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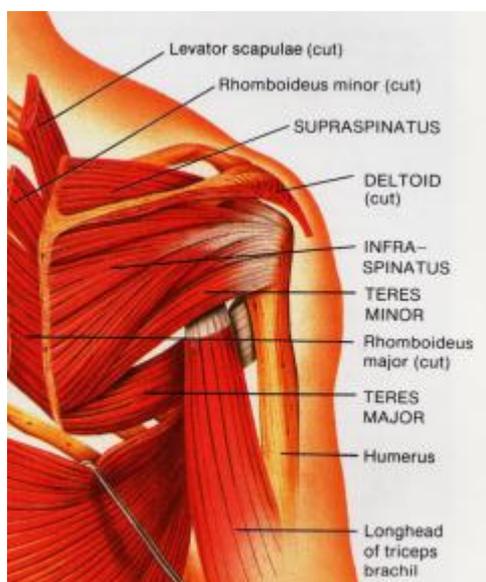
Frozen Shoulder (Adhesive Capsulitis)

What is Frozen Shoulder?

Frozen shoulder, also known as Adhesive Capsulitis, is a condition that affects the shoulder joint capsule and results in loss of movement and pain in the shoulder joint. It is different from rotator cuff injury or shoulder tendonitis in that frozen shoulder affects the joint capsule, whereas the other two conditions affect the muscles and tendons of the shoulder joint.

Anatomy of the Shoulder Joint

The shoulder joint is a truly remarkable creation. It's quite a complex formation of bones, muscles and tendons and provides a great range of motion for your arm. The only downside to this extensive range of motion is a lack of stability, which can make the shoulder joint vulnerable to injury.



The shoulder is made up of three bones, and the tendons of four muscles (tendons attach muscle to bone.) The bones are called the "scapula," the "humerus" and the "clavicle." In layman's terms, these are called the shoulder blade, the upper arm bone and the collarbone, respectively. The joints are the acromio-clavicular joint, the sterno-clavicular joint and the glenohumeral joint (where the humerus bone articulates with the socket of the shoulder blade).

There are four muscles whose tendons are attached to the glenohumeral joint, the "Supraspinatus," "infraspinatus," "teres minor" and "subscapularis.". There are also ligaments to give stability to the joint.

Frozen shoulder occurs when there is inflammation of the capsule of the glenohumeral joint, which can result in the capsule surrounding the glenohumeral joint forming adhesions with the head of the humerus.

What Causes Frozen Shoulder?

Frozen shoulder often occurs after another shoulder injury like rotator cuff sprain, that isn't adequately treated.

Sometimes hormonal and genetic conditions like diabetes and hyperthyroidism can also contribute to frozen shoulder.

Symptom of Frozen Shoulder

The most common symptoms of frozen shoulder are severe pain and difficulty raising the arm in any direction.

The normal progression of frozen shoulder has been described as having three stages.

- In **stage one**, (the freezing phase) the patient begins to develop pain and stiffness in the shoulder joint. This stage can last up to four months.
- In **stage two**, (the frozen phase) the difficulty moving the arm remains but the pain begins to decline. This stage can last from four months to nearly a year.
- In **stage three**, (the thawing phase) the full range of movement begins to return to the shoulder joint. This stage can last four months.

Without adequate treatment, most sufferers of frozen shoulder will be fully recovered in 12 to 18 months but some cases have lasted for up to three years, although these are extremely rare. With suitable treatment, most cases will clear up in 3 to 6 months.

Pain control is only required if the pain interferes with sleep or daily activities. The easiest method is applying ice packs to the shoulder for 20 to 30 minutes at a time.

Higher levels of pain may require cortisone shots or medication prescribed by your doctor.

Pain control also means avoiding shoulder motions or positions that are painful. Such motions include activities that raise the arm to the side or rotate the arm outward. Daily activities that might aggravate the pain include reaching overhead, reaching into the back seat of a car, trying to open a heavy door, and driving a car. Some experts believe that trying to push through painful activities can actually prolong the course of the disease.

Once you identify your own particular set of aggravating activities, try to find other ways to do them. For example, open the heavy door with both hands or push the door open with your buttocks. When driving, don't hold your hands near the top of the steering wheel. If your right shoulder is affected, avoid using a car that has a manual transmission. For activities in which you reach overhead, stop doing them, use the other arm, or use a step stool or ladder.

Exercises

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- Flexion: Stand upright and hold a stick in both hands, palms down. Stretch your arms by lifting them over your head, keeping your elbows straight. Hold for 5 seconds and return to the starting position. Repeat 10 times.
- Extension: Stand upright and hold a stick in both hands behind your back. Move the stick away from your back. Hold the end position for 5 seconds. Relax and return to the starting position. Repeat 10 times.
- External rotation: Lie on your back and hold a stick in both hands, palms up. Your upper arms should be resting on the floor, your elbows at your sides and bent 90°. Using your good arm, push your injured arm out away from your body while keeping the elbow of the injured arm at your side. Hold the stretch for 5 seconds. Repeat 10 times.
- Internal rotation: Stand upright holding a stick with both hands behind your back. Place the hand on your uninjured side behind your head grasping the stick, and the hand on your injured side behind your back at your waist. Move the stick up and down

your back by bending your elbows. Hold the bent position for 5 seconds and then return to the starting position. Repeat 10 times.

- Shoulder abduction and adduction: Stand upright and hold a stick with both hands, palms down. Rest the stick against the front of your thighs. While keeping your elbows straight, use your good arm to push your injured arm out to the side and up as high as possible. Hold for 5 seconds. Repeat 10 times.

Scapular range of motion: Stand and shrug your shoulders up and hold for 5 seconds. Then squeeze your shoulder blades back and together and hold 5 seconds. Next, pull your shoulder blades downward as if putting them in your back pocket. Relax. Repeat this sequence 10 times.

Pectoralis stretch: Stand in a doorway or corner with both arms on the wall slightly above your head. Slowly lean forward until you feel a stretch in the front of your shoulders. Hold 15 to 30 seconds. Repeat 3 times.

Biceps stretch: Stand facing a wall (about 6 inches away from the wall). Raise your arm out to your side and place the thumb side of your hand against the wall (palm down). Keep your elbow straight. Rotate your body in the opposite direction of the raised arm until you feel a stretch in your biceps. Hold 15 seconds, repeat 3 times.