

DISLOCATED SHOULDER

What is a dislocated shoulder?

A dislocation of the shoulder joint happens when the bones making up your shoulder joint are moved apart so that the joint no longer functions.

Your shoulder is made up of two bones: the ball (the end of the arm bone, or humerus) and the socket (part of your shoulder blade, or scapula). When the ball part of the joint is dislocated in front of the socket, it is called an anterior dislocation. When it is dislocated behind the socket, it is called a posterior dislocation. In severe cases, ligaments, tendons, and nerves also can be stretched and injured.

How does it occur?

The most common type of dislocation is an anterior dislocation. It can be caused by a fall onto your outstretched hand or your shoulder. It may happen if your arm is forced into an awkward position.

A posterior dislocation may occur as a result of a powerful direct blow to the front of your shoulder. It may also be caused by a violent twisting of your upper arm, such as that caused by an electric shock or seizure.

Dislocated shoulders are common in contact sports such as football, rugby, hockey, and lacrosse. Other sports that may cause the injury include downhill skiing, volleyball, and soccer.

You also may be genetically susceptible to a dislocation, particularly if your shoulder goes out often or easily. Other members of your family may have the same problem.

What are the symptoms?

The main symptom is pain in your shoulder and upper arm that is made worse by movement.

If you have an anterior dislocation, you will find yourself holding your arm on the dislocated side slightly away from your body with your opposite hand. This will keep your dislocated shoulder in the least uncomfortable position. Your shoulder will have a large bump rising up under the skin in front of your shoulder. Your shoulder will look square instead of round.

If you have a posterior dislocation, you will hold your arm on the dislocated side tightly against your body. You will have a large bump on the back of your shoulder.

How is it diagnosed?

Your healthcare provider will ask about your medical history, including your symptoms, previous treat-

ment, and family history. During your physical exam, he or she will check for:

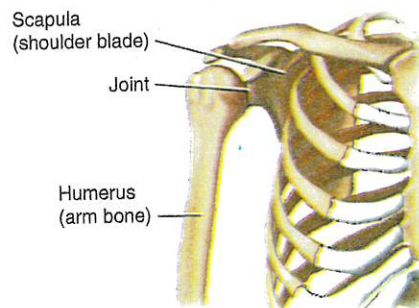
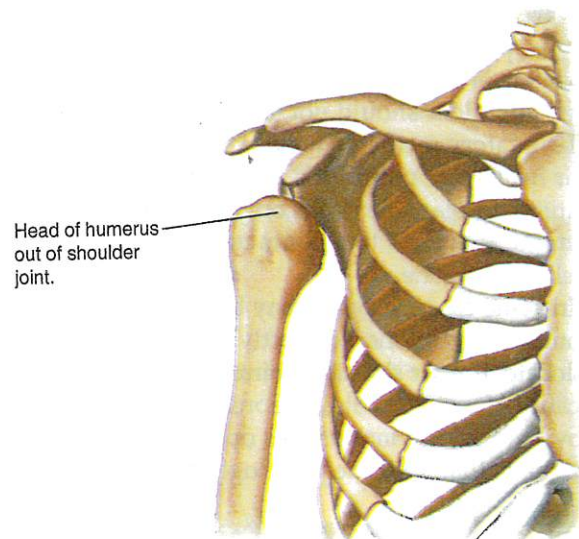
- shoulder tenderness and weakness
- numbness in the shoulder area, arm, or hand
- pain when you move your shoulder or loss of normal shoulder movement
- shoulder instability and deformity

You will have an X-ray of the joint and surrounding areas to confirm the dislocation and check for broken bones.

What is the treatment?

You should go to your healthcare provider's office or the hospital emergency room right away if your shoulder becomes dislocated. Put ice on your shoulder. Cold reduces swelling by controlling internal bleeding and the buildup of fluids in and around the injured area.

DISLOCATED SHOULDER



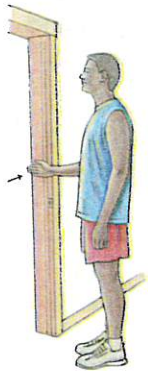
Normal

DISLOCATED SHOULDER REHABILITATION EXERCISES

Do these exercises as soon as your healthcare provider says you can.

SHOULDER

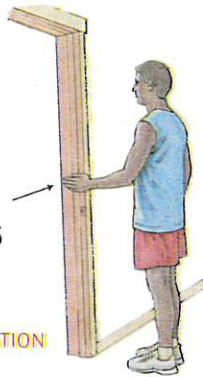
Part I



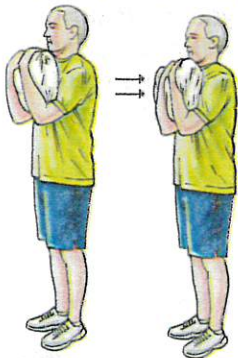
1. ISOMETRIC SHOULDER EXTERNAL ROTATION: Standing in a doorway with your elbow bent 90° and the back of your wrist pressing against the door frame, try to press your hand outward into the door frame. Hold for 5 seconds. Do 3 sets of 10.

ISOMETRIC SHOULDER EXTERNAL ROTATION

2. ISOMETRIC SHOULDER INTERNAL ROTATION: Standing in a doorway with your elbow bent 90° and the front of your wrist pressing against the door frame, try to press your palm into the door frame. Hold for 5 seconds. Do 3 sets of 10.



ISOMETRIC SHOULDER INTERNAL ROTATION



3. ISOMETRIC SHOULDER ADDUCTION: With a pillow between your chest and your arms, squeeze the pillow with your arms and hold 5 seconds. Do 3 sets of 10.

ISOMETRIC SHOULDER ADDUCTION

4. ISOMETRIC SHOULDER FLEXION: Stand facing a wall with your elbow bent at a right angle and held close to your body. Press your fist forward against the wall, hold this for 5 seconds, then rest. Do 3 sets of 10.



ISOMETRIC SHOULDER FLEXION



5. ISOMETRIC SHOULDER EXTENSION:

Standing facing away from the wall with your elbow touching the wall, press the back of your elbow into the wall and hold for 5 seconds. Rest. Do 3 sets of 10.

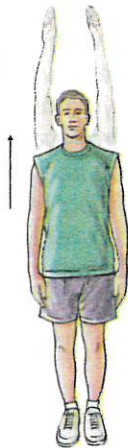
ISOMETRIC SHOULDER EXTENSION

6. ISOMETRIC SHOULDER ABDUCTION:

Standing with one side towards the wall and your elbow bent at a 90-degree angle, press the side of your arm into the wall as if attempting to lift it. Hold for 5 seconds. Rest. Do 3 sets of 10.



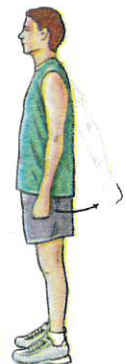
ISOMETRIC SHOULDER ABDUCTION



7. SHOULDER FLEXION: Stand with your arms hanging down at your side. Keep your elbow straight and lift your arms up over your head as far as you can reach. Hold the end position for 5 seconds. Do this 10 times.

SHOULDER FLEXION

8. SHOULDER EXTENSION: Stand with your arms at your sides. Move the arm on one side back, keeping your elbow straight. Hold this position for 5 seconds. Return to the starting position and repeat 10 times.



SHOULDER EXTENSION