FROZEN SHOULDER (ADHESIVE CAPSULITIS)

What is a frozen shoulder?

A frozen shoulder is stiffness and pain in the shoulder.

How does it occur?

A frozen shoulder usually develops after a shoulder injury that causes pain and does not allow you to move your shoulder enough. Sometimes, however, a frozen shoulder may occur for no known reason. If you have limited movement of your shoulder for weeks, months, or years because of an injury, the capsule surrounding the shoulder joint may become very stiff. Your shoulder may develop scar tissue, or adhesions, in the joint.

What are the symptoms?

Your shoulder will lose its normal ability to move in all directions. You may not be able to lift your arm above your head or be able to scratch your back. Movement of the shoulder may be very painful. You may feel grinding when moving your shoulder.

How is it diagnosed?

Your healthcare provider will examine your shoulder and may take X-rays. You may also have an MRI (magnetic resonance imaging). In some cases, you may have an arthrogram (an X-ray of your shoulder after dye is injected into your shoulder joint).

How is it treated?

Your healthcare provider will probably send you to physical therapy for a supervised exercise program. You will also be given exercises to do at home. Your provider may prescribe an anti-inflammatory medicine and may give you a shot of a corticosteroid medicine into your shoulder joint (adults aged 65 years and older should not take non-steroidal anti-inflammatory medicine for more than 7 days without their healthcare provider's approval). When your shoulder is painful, it is important to use ice packs on your shoulder for 20 to 30 minutes 3 or 4 times a day.

In cases that do not respond to therapy, your provider may talk to you about doing a "manipulation under anesthesia." In this procedure, you are put to sleep with a general anesthetic and your provider moves your shoulder in various directions to break up the adhesions (bands of scar tissue) in your shoulder capsule. You may need arthroscopic surgery to see if there are other causes for your frozen shoulder.

When can I return to my sport or activity?

The goal of rehabilitation is to return you to your sport or activity as soon as is safely possible. If you return too soon you may worsen your injury, which could lead to permanent damage. Everyone recovers from injury at a different rate. Return to your activity will be determined by how soon your shoulder recovers, not by how many days or weeks it has been since your injury occurred. In general, the longer you have symptoms before you start treatment, the longer it will take to get better.

You may safely return to your sport or activity when:

- your injured shoulder has full range of motion without pain
- your injured shoulder has regained normal strength compared to the uninjured shoulder

In throwing sports, you must gradually rebuild your tolerance to throwing. This means you should start with gentle tossing and gradually throw harder. In contact sports, your shoulder must not be tender to touch. Contact should progress from minimal contact to harder contact.

How can I prevent a frozen shoulder?

After you have had an injury to your shoulder it is important that you do not limit your shoulder motion for a prolonged period of time. It is important to do your shoulder rehabilitation exercises as they have been prescribed. If you feel that you are losing range of motion in your shoulder you should see your healthcare provider.

FROZEN SHOULDER REHABILITATION EXERCISES

1. WAND EXERCISE: 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.

WAND EXERCISE: FLEXION &



6. WAND EXERCISE: SHOULDER ABDUC-TION AND ADDUCTION: Stand upright and hold a stick with both hands,

front of your thighs. While keeping

other arm out to the side and up as

palms facing away from your body. Rest the stick against the

your elbows straight, use

high as possible. Hold for 5 seconds. Repeat 10 times.

one arm to push your



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.

WAND EXERCISE: SHOULDER ABDUCTION AND ADDUCTION

SCAPULAR ACTIVE RANGE OF MOTION

2. WAND EXERCISE: 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.

WAND EXERCISE: EXTENSION

3. WAND EXERCISE: 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 one arm,

push your other arm out away from your body while keeping the elbow of the arm being pushed at your side. Hold the stretch for 5 seconds.

Repeat 10 times.

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WAND EXERCISE: EXTERNAL ROTATION

8. 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.

PECTORALIS STRETCH



4. WAND EXERCISE: INTERNAL ROTATION:

Stand with one arm behind your head holding the end of a stick. Put your other arm behind your back at waist level and grab the stick. 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.

WAND EXERCISE: INTERNAL ROTATION

9. 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.

BICEPS STRETCH

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