

SHOULDER IMPINGEMENT NON OPERATIVE TREATMENT

What is wrong with your shoulder?

Your shoulder pain arises from a problem in the shoulder rotator cuff tendons and the subacromial space. The rotator cuff is an important group of muscles that help lift and move the shoulder. The rotator cuff tendons pass between two bones, the acromion (top of the shoulder blade) and the humerus (arm bone). The cuff glides under the acromion.

If the tendon increases in size, there may not be enough space, then the tendon becomes painful as it rubs on the acromion. With repeated overuse, a single injury or even just wear and tear, the tendon becomes inflamed and swollen and gets pinched or impinges between the two bones.

The bursa is a small fluid sac that acts as a lubricating cushion between the tendons and the acromion. Like the tendon, the bursa may become inflamed. The bursa lies directly on the tendon and most commonly both the tendon and bursa are inflamed together.

How did this problem start?

You may have traumatised the tendon in a lifting or falling accident. Unusual repeated use of the arm in the overhead position, ie painting, weight lifting, cutting a hedge or tennis can cause damage. Sometimes no specific reason is found. As we age our ability to repair the damage that occurs during these normal activities decreases.

What I recommend

Based on the description of your problem, my physical examination and review of the X-rays, I believe that **surgery is not indicated on your shoulder at this time**. Many people with your condition can be cured with non-operative treatment.

What is non-operative treatment?

Rest the Shoulder: By this I mean rest the shoulder from painful motions and activities. When you move the shoulder particularly out to the side or overhead, the tendon and bursa become painful. On the other hand activities that are not painful don't damage it.

If it hurts, don't do it.

Usually though the arm can be painlessly and normally used below shoulder height.

Exercise: General physical activity is helpful. This particularly applies to aerobic sports like walking, jogging, bicycle riding or any other sport that raises the heartbeat but doesn't irritate your shoulder.

Physical Therapy: Physiotherapy exercises are helpful. The exercises taught to you are designed to improve movement and strength in shoulder muscles. The exercises taught by your physiotherapist should become part of your daily routine (like cleaning your teeth).

Medication: Anti-inflammatory medication can be helpful to reduce pain and inflammation in some patients. Some patients require simple analgesics (Panadol, Panadeine or Digesic) for pain. Night time pain is a feature of shoulder problems, and medications taken before sleep are often helpful.

Injections: A series of steroid injections are often helpful in relieving pain, particularly night pain and may help improve shoulder movement.

Time

With the above measures, many people see a considerable improvement in 6 to 8 weeks. This can be very frustrating as you wish to pursue various activities and sports but the recovery time is determined by the severity of the inflammation, the shape of your bones, and the ability of your body to heal.

How do you know the tendon is not torn?

The only way to know for certain is to inspect the tendon during surgery.

Special investigations such as ultrasound or MRI are needed to demonstrate a tear.

We usually obtain these more invasive tests if you do not respond to routine care over the 6-8 weeks.

You should also note that many people who have shoulder tears and have no pain, and can use their shoulder nearly normally despite a small or incomplete tear, therefore even if a tear is shown with special tests, exercises and physio can still be used to avoid surgery, particularly if the tear is small.

Is surgery ever needed?

Not everyone recovers from shoulder impingement. The indications for surgery are persistent pain interfering with your activities of daily living, work and/or sports and your shoulder has not responded to the program described above after 6 to 8 weeks.

What if you have more questions?

Please feel free to call me or make a further appointment to see me on (02) 9409 0500, and I will be happy to discuss your shoulder condition further.

GREGGORY BURROW