Frozen Shoulder



What is it?

The medical name for frozen shoulder is adhesive capsulitis. It is a condition that affects the ability to move your shoulder. It causes stiffness and pain in the shoulder joint, which reduces normal movement.

Frozen shoulder usually only affects one shoulder, although in approximately 1 in 5 cases the condition occurs in the other shoulder. The condition is uncommon in young people. Most cases occur in people between the ages of 40 and 60. Recovery can be frustratingly slow and symptoms can last for two to three years, although for a lot of people it is much faster than this.

Symptoms

You may find it hard to carry out everyday tasks such as dressing, driving and sleeping comfortably. Some people find they are unable to move the shoulder at all, hence the name, frozen shoulder. Symptoms of frozen shoulder are usually experienced in three stages, which are spread over a number of months or years:

- Stage one: the shoulder starts to ache and feel stiff, before becoming painful. Pain is often worse at night and when you lie on the affected side. This stage lasts between two and nine months.
- Stage two: this is known as the adhesive stage. The shoulder typically becomes more and more stiff, although the pain does not normally get worse. The muscles may start to waste slightly as they are not being used. This stage lasts between four and twelve months.
- Stage three: this is the recovery stage in which you gradually regain movement of the shoulder. The pain also fades, although it may recur from time to time as the stiffness eases. Although you may not regain full movement of your shoulder, you will be able to do many more tasks. This stage lasts five to twelve months.

What causes it?

The exact cause of frozen shoulder is not known, but it is thought that scar tissue forms in the shoulder joint. This leaves less space for the upper arm bone (humerus) to move around. Scar tissue may form for a number of reasons, such as after a minor shoulder injury or from heavy exercise, but sometimes there is no obvious cause.

Frozen shoulder is more common in women than men. This may be linked to hormonal changes, as it is particularly common around the time of the menopause.

Posture has also been linked to frozen shoulder. Some studies have shown that a consistently round-shouldered posture may cause a shortening in one of the shoulder ligaments. Long periods of immobility, such as following surgery or an arm injury, may cause the condition to develop.

People with other health conditions, including heart disease, lung disease, chronic bronchitis and diabetes may have an increased risk of developing frozen shoulder. Cardiovascular disease, Parkinson's disease, and an overactive thyroid gland (hyperthyroidism) are also linked to this condition.

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What should you do?

Treatment of frozen shoulder varies depending on the stage it is at, and how severe the pain and stiffness are. There is no outright cure, and the aim of treatment is to keep the joint as mobile as possible. The most effective treatment is that which maintains a good range of movement until the shoulder starts to heal. Treatment may include the following:

- Shoulder exercises: regular, gentle exercise can help to keep the shoulder joint mobile. If your shoulder is very stiff, exercise may hurt, and it should only be carried out with the guidance of your doctor or physiotherapist. If you are able to, continue using your shoulder as normal. 'Saving' the shoulder can cause the muscle to waste and may make stiffness worse.
- Painkillers: over-the-counter painkillers such as paracetamol or prescription-only drugs such as codeine may be taken to ease pain and you should discuss this with your GP or pharmacist.
- Anti-inflammatory painkillers: such as ibuprofen and diclofenac, are often prescribed to ease pain and inflammation. Any medication that you take should be discussed with your GP or pharmacist.
- Steroid injections into or near the shoulder joint may be effective at relieving pain and inflammation for a few weeks. However, injections are not a cure, and symptoms may return.

Can you prevent it?

If you have pain in your shoulder that limits your range of movement, it is important to see your GP or physiotherapist. Early treatment of frozen shoulder can help to prevent long-term stiffness in the joint. Make sure you gently stretch the shoulder before exercising, and try to maintain good posture.

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