

FACT SHEET

Preventing and Managing Shoulder Conditions

Painful shoulder conditions are a relatively common occurrence. This *WorkCare Fact Sheet* describes different types of shoulder complaints, treatment guidance and recommended injury prevention measures.

Shoulder Condition Causes

The likelihood of experiencing pain, loss of strength, diminished range of motion and other shoulder conditions increases with age. Sports that involve throwing, swimming or swinging a racket or club, hobbies such as painting or gardening, and certain repetitive tasks on and off the job can affect shoulder function. Vehicular accidents and slips, trips and falls are also common causes of shoulder injuries.

Signs and Symptoms

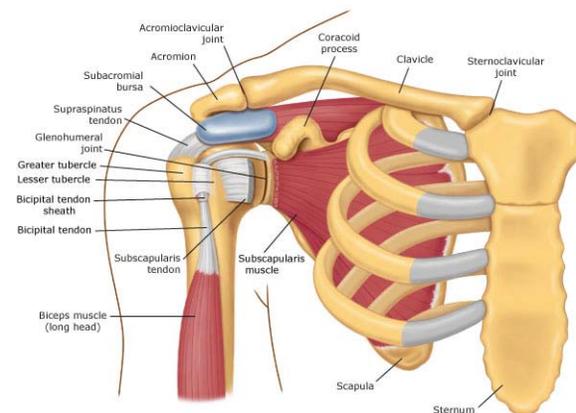
It's advisable to consult a physician when acute shoulder pain occurs following an accident or injury. A medical consultation is also recommended when:

- A shoulder joint appears deformed
- The shoulder doesn't activate or you are unable to move your arm away from your body
- There is redness, sudden swelling or/intense pain
- The area surrounding the joint feels tender and warm

Immediate medical attention should be sought if shoulder pain is accompanied by heart attack indicators such as difficulty breathing and/or a sense of tightness in the chest. When pain travels along nerves to the shoulder, it may be a warning sign of gallbladder, liver or heart disease, or a neck/spinal condition requiring a medical evaluation.

Diagnosis

The shoulder is comprised of bones and soft tissues—muscles, tendons and ligaments.



Commonly occurring shoulder conditions include:

- Dislocation
- Separation
- Tendinitis and bursitis
- Rotator cuff tear
- Frozen shoulder
- Fracture
- Arthritis

Shoulder conditions typically are diagnosed based on:

- Medical history
- Physical examination
- Tests such as x-rays, ultrasound and magnetic resonance imaging (MRI)

Treatment

Shoulder complaints are often initially treated with rest, ice, compression and elevation (RICE):

R: Avoid activity that puts excessive stress on the shoulder.

I: Put an ice pack on the injured area for 20 minutes, four to eight times per day.

C: Apply even pressure (compression) to help reduce swelling; use a wrap or bandage to hold the ice pack in place.

E: Keep the injured area above heart level.

Over-the-counter nonsteroidal anti-inflammatory medications (NSAIDs) such as acetaminophen, ibuprofen and naproxen sodium may be recommended to help reduce swelling and relieve pain.

Dislocation: When a shoulder is dislocated, a clinician performs a procedure to push the ball of the upper arm back into the socket. Treatment for a dislocation or shoulder separation may include wearing a sling or device to keep the shoulder in place; rest and ice; and exercises to improve range of motion, strengthen muscles and prevent re-injury.

Tendinitis and bursitis: In tendinitis of the shoulder, tendons become inflamed (red, sore and swollen) from being pinched by parts around the shoulder. Bursitis occurs when the bursa—a small fluid-filled sac that helps cushion the shoulder joint—is inflamed. Bursitis is sometimes caused by disease, such as rheumatoid arthritis, or it may be attributed to certain sports or frequent overhead reaching.

Tendinitis and bursitis may occur separately or concurrently. Treatment for tendinitis and bursitis includes:

- Rest and ice
- NSAIDs to reduce pain and swelling

- Ultrasound (sound-wave vibrations) to warm deep tissues and improve blood flow
- Gentle stretching and exercises to build strength
- Injection of a corticosteroid drug if the shoulder does not get better
- Surgery may be recommended if the shoulder does not improve with care after six to 12 months

Rotator Cuff Tear: The rotator cuff is comprised of four muscles that surround the arm bone; the cuff keeps the shoulder steady as the arm moves. Pain occurs when a tendon that attaches muscle to bone becomes inflamed or pinched. Pain also occurs when the subacromial bursa is damaged.

Rotator cuff tendons can become inflamed or torn from frequent use, as part of the aging process or in a fall. Treatment for a torn rotator cuff depends on age, health, injury severity and how long the person has had the injury.

Treatment may include:

- Heat or cold
- NSAIDs to reduce pain and swelling
- Electrical stimulation of muscles and nerves
- Ultrasound
- Cortisone injection
- Exercise to improve range-of-motion, strength and function
- Surgery if the tear does not improve with other treatments

Frozen Shoulder: Movement is restricted in people with a frozen shoulder. Causes include:

- Lack of use due to chronic pain
- Rheumatic disease
- Bands of tissue that grow in the joint and restrict motion

- Lack of fluid that lubricates the shoulder joint

Treatment may include:

- Medication to reduce pain and swelling
- Heat
- Gentle stretching exercises
- Electrical stimulation of muscles and nerves
- Cortisone injection
- Surgery if the shoulder does not improve with other treatments

Fracture: A fracture is a crack through part or all of a bone. In the shoulder, a fracture from a fall or blow often involves the collarbone or upper arm bone. Treatment may include:

- A doctor positioning bones to promote healing
- A sling or other device to keep bones in place
- After the bone heals, exercise to strengthen the shoulder and restore movement
- Surgery

Arthritis: There are two types:

- Osteoarthritis—a disease caused by wear and tear of the cartilage
- Rheumatoid arthritis—an autoimmune disease causing one or more joints to become inflamed

Osteoarthritis of the shoulder is often treated with NSAIDs. People with rheumatoid arthritis may need physical therapy and medicine such as corticosteroids. If these treatments for arthritis of the shoulder don't relieve pain or improve function, surgery may be needed.

Prevention Measures and Exercises



The following measures are recommended to help prevent shoulder problems or injuries:

1. Warm up well and stretch before any activity. Stretch after exercise to keep muscles from shortening and cramping.
2. Maintain good posture—straight and relaxed.
3. Wear protective gear during sports or recreational activities.
4. Always use your seat belt when in a motor vehicle.
5. Use proper lifting techniques and lifting aids for heavy objects.
6. Avoid attempting to catch falling objects.
7. Avoid carrying a shoulder bag; if using a backpack, ensure a proper fit.
8. Use a step stool; do not stand on chairs or other unsteady objects.
9. Take micro-breaks and alternate hands when performing repetitive activities.
10. Do the exercises on the next page to strengthen your wrist, arm, shoulder, neck and back muscles.

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Front and Side Shoulder



Exercise 1

- Keep your elbows slightly bent with weights in hand
- Feet shoulder width apart
- Lift weights directly in front of you to shoulder level; weights should be no more than 5 pounds
- Maintain good posture
- 3 sets of 6-8 repetitions

Exercise 2

- As above, lift weights laterally away from your sides

Can Lift

Exercises 1 and 2

- Stand with feet shoulder width apart
- Keep your elbows slightly bent
- Maintain good posture
- Grip weights (maximum 5 pounds each) with hands facing forward
- Lift to shoulder level in a "V" formation
- 3 sets of 6-8 repetitions
- Repeat with hands facing backward



Shoulder Extension



- Use a thera-band or weights no heavier than 5 pounds
- Stand with feet shoulder width apart
- Move hands backward away from your body
- Keep shoulders down
- 3 sets of 6-8 repetitions

Resources

1. National Institute of Arthritis and Musculoskeletal and Skin Diseases (NIAMS) <http://www.niams.nih.gov>
2. National Institutes of Health www.niams.nih.gov/health_info/shoulder_problems/
3. American Academy of Orthopedic Surgeons <http://orthoinfo.aaos.org/PDFs/A00065.pdf>