FROZEN SHOULDER



WHAT IS FROZEN SHOULDER?

Frozen shoulder, also known as adhesive capsulitis, is a condition characterised by stiffness and limited range of motion in the shoulder. The condition is usually caused by shoulder impingement, which occurs when the bones in the shoulder rub together or compress the soft tissues. Frozen shoulder is a chronic condition, meaning it can last for months or even years.

The good news is that frozen shoulder is treatable. Manual intervention through exercise rehabilitation and massage therapy can help improve range of motion and reduce pain.

Surgery is also an option for severe cases, but most people with frozen shoulder will eventually recover without surgery.

WHAT ARE THE SYMPTOMS OF FROZEN SHOULDER?

Frozen shoulder is a condition that causes pain and stiffness in the shoulder. The range of motion in the shoulder is also limited.

Frozen shoulder often occurs after an injury. A frozen shoulder diagnosis would typically be given when an acute shoulder injury is ignored and becomes chronic. The symptoms of frozen shoulder usually come on gradually and worsen over time.

Pain is the most common symptom, but some people also experience a burning sensation or numbness. The pain may be worse at night. Shoulder impingement may also occur, which is when the tendons and muscles around the shoulder are unable to move properly. Frozen shoulder sufferers often report being unable to lift items above their head, such as using an overhead cupboard, or put their arms behind their back, such as putting on a bra.
If you think you might be suffering from a frozen shoulder, it's important to see a healthcare professional, so they can diagnose and treat the condition. Early treatment is often the most effective.

WHAT ARE THE CAUSES OF FROZEN SHOULDER?

One of the most common causes of frozen shoulder is repetitive strain or overuse of the shoulder joint. This can occur in people who do a lot of manual labour or participate in sports that involve repetitive motions of the arm, such as baseball or tennis.

Frozen shoulder can also be caused by acute injury to the shoulder, such as a fall or dislocation. It can also be affected by how a patient sleeps on their shoulder. In some cases, frozen shoulder may develop without any apparent cause.

The condition is more common in women and people over the age of 40. People with diabetes or other health conditions that affect the nervous system are also at increased risk.

TREATMENT OF FROZEN SHOULDER

In some cases, the condition will heal itself over time. The NHS advises that a frozen shoulder will get better on its own in around three years! The good news is that there are treatments available that can reduce this timeframe.

According to NICE guidelines, one option where the shoulder is not improving is steroid injections, which can reduce pain and swelling. Another option, one that we provide in clinic, is manual therapy with a sports and exercise therapist, which can help to stretch and strengthen the muscles around the shoulder joint and assist in improving posture. The improvement in posture can abate the impingement and help to recover the shoulder back to normal.



Manual therapy can involve:

- Progressive mobilisation of the shoulder joint.
- Soft tissue release.
- Ultrasound.
- Exercise therapy (e.g. stretching and strength exercises).

CAN FROZEN SHOULDER CAUSE OTHER ISSUES?

When suffering from frozen shoulder, patients will often move their shoulder less, which can affect muscle groups around the area. Therefore, they may experience tightness in the pectoralis, upper trapezius, deltoids, scalenes and sternocleidomastoid (SCM) muscles. This may have implications for their broader posture, potentially resulting in torticollis (a twisting of the neck) and cervical facet syndrome (a type of neck and back pain).

The biggest impact of frozen shoulder is the potential impact on sleep. Frozen shoulder can cause significant discomfort, which may mean sufferers are unable to sleep comfortably.

CAN FROZEN SHOULDER BE CONFUSED WITH ANYTHING ELSE?

We often see patients in clinic who have been diagnosed with frozen shoulder who are instead suffering from biceps groove tendinitis. This can affect range of movement in raising the arms in the same way as frozen shoulder. However, unlike frozen shoulder, patients suffering from biceps groove tendinitis can move their arms above their heads.

It is worth speaking to a musculoskeletal professional to obtain a diagnosis and understand treatment options.

CAN I TREAT FROZEN SHOULDER MYSELF?

Frozen shoulder can be treated at home, but only with very limited treatment options. Using an alternating protocol of ice followed by heat on the affected area has been proven to offer some help.

Gentle mobilisation of the shoulder joint will gradually improve range of movement. Some gentle stretching of the affected area can help to return the joint to its full range of movement.

Sleep can be improved by hugging a pillow to release the pressure on the affected shoulder.