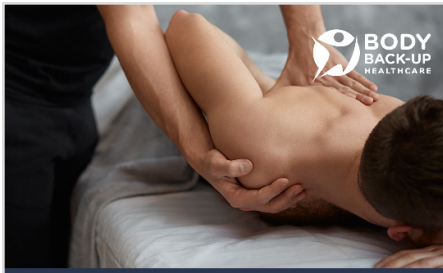


SHOULDER PAIN



PATIENT OSTEOPATHY PARTNERSHIP

- EXPLORE
- EMPATHISE
- EXPLAIN
- ENGAGE
- EXERCISE

Slow build-up 'tell-tale' time-line

"Shoulder problems can appear to start "spontaneously", with pain in and around the shoulder girdle without apparent.

trauma or injury and yet the pain and stiffness start to increase progressively. This most often produces a cycle of decreasing strength & greater stiffness.

Many sufferers try to avoid using the affected Shoulder and transfer activities to the opposite arm. The elbow and wrist area on the painful arm side get extra "use", and "Tennis Elbow" may develop.



Clear Diagnosis is Key

Each case needs careful evaluation before being 'pigeon-holed'.

Typically the 'frozen' shoulder is split into three distinct phases but this does not inform the accurate and individual best management steps.

Six months 'frosting'

Six months 'frozen'

Six months 'defrosting'

If the shoulder capsule has become injured surgery may be indicated to repair this initially before any other therapy can be successfully tried.

At Body Back-up, we see people at different stages, with a mix of different types of issues. There is a common restriction pattern where reaching across to touch the opposite shoulder becomes difficult and activities such as dressing.

Pain frequently increases at night whilst lying on the affected shoulder, resulting in sleepless nights, and painful mornings.

Other Causes of Shoulder Pain

There are many 'wear and tear' causes of shoulder complaints, as well as inflammatory 'Rheumatic' conditions.

Joint "pinching" often brings on muscular contracture.

Even lifting shopping bags awkwardly on a regular basis can aggravate symptoms over weeks or months

Risk Factors

The posture of those who develop shoulder problems, work at a desk or "Over-working out" at the gym, performing e.g. Pull-downs or chin-ups can be a cause of problems. Fractured wrists or the use of a sling or even incorrect pillow height may be factors too.

Mild whiplash victims after a car accident can be more prone to shoulder problems, but may also exhibit referred pains and pins and needles to their arms.

Our Multi-Factor Strategy

Rehabilitation is a balancing exercise with several

sessions of treatment over a number of weeks. Both the muscular mechanical aspects of shoulder dysfunction and neck dysfunction. This "locked-in cycle" must be broken to restore normality.

Combining exercises, the application of heat, helps to increase the strength of the shoulder girdle in a progressive manner, reducing after-exercise stiffness.



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