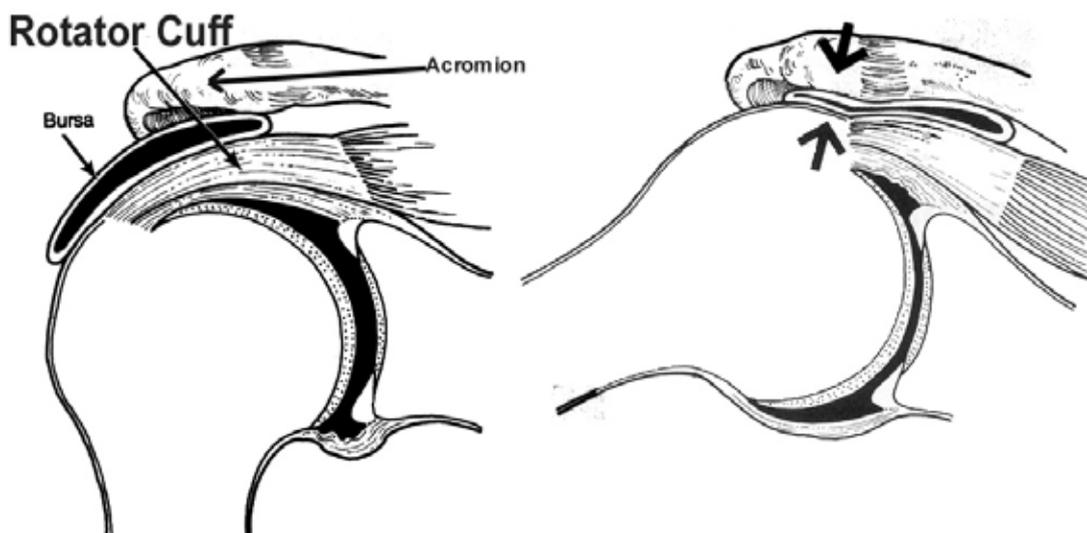




SHOULDER IMPINGEMENT - PATIENT NOTES

This is the most common condition seen in the shoulder and is also known as “bursitis”

There is inflammation of the Rotator Cuff muscles and tendons and often the adjacent Bursa, which is a lubricating sac superficial to the Rotator Cuff. As one lifts the arm, the Bursa and the Rotator Cuff rub on the overlying Acromion bone causing “impingement”. This causes pain with elevation and rotation of the arm as well as when loading the shoulder. Night pain is a common and often significant symptom but its cause is unknown. Patients often complain of loss of motion and power.



This condition can occur at any age. It is more common in persons who use their arms in overhead positions and repetitively. It is also more common as one ages because the Rotator Cuff degenerates, as one ages, and is therefore more likely to become inflamed. The condition is also more common when the Acromion bone has a hook or spur, but it should be noted that up to 70% of people are born with a hooked Acromion, and the majority of people who have such hooks live without symptoms.

This condition is usually completely reversible with non operative treatment. Anti-inflammatory medication, hydrocortisone injections (work to reduce inflammation) and physiotherapy are the mainstay of treatment. Not only is it important to see the physiotherapist but it is also important to do the stretching and strengthening exercises two or three times a day by yourself. One should also avoid overhead activity and heavy work until the condition settles.

It often takes 3 to 6 months for the symptoms to resolve.

On occasions when symptoms persist, an arthrogram or M.R.I. is needed to ensure that you do not have a tear of the Rotator Cuff (an ultrasound is a very inaccurate test). Sometimes impingement “type” symptoms can herald the start of a different condition called a “frozen shoulder” which declares itself over a few months with severe pain and shoulder stiffness.

If non operative treatment does not work over 3 to 6 months and further investigations reveal that there is no other cause for the pain, then an Arthroscopic Acromioplasty may be recommended. This is a relatively small operation done through an arthroscope (minimally invasive surgery) where the acromion bone is trimmed to allow more space for the Rotator Cuff to move. Surgery however is uncommonly required and only recommended if non operative treatment fails.

REMEMBER

- This condition is completely curable with non operative treatment
- Physiotherapy is very important
- Avoid overhead activity and heavy work until symptoms settle
- Rarely is surgery necessary.

January 2009