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Shoulder Pain/ Impingement

You've just finished a good workout in the Gym. Okay, so maybe you overdid it a bit, but that means an extra pint won't rock the diet plan, doesn't it?

Only, as you try and lift that pint up to have your first sip, you get this pain in your shoulder and spill half the beer down your front. Oh well, the diet's safe but you have irritated the shoulder joint so you won't be able to get those killer pecs for the beach this summer.

The shoulder is perhaps the most complicated joint in the body. Many of the other joints, such as the elbow and fingertip joints, are like simple hinges. They can only bend in one direction and straighten out. The shoulder can move in all directions. Unfortunately, this extra movement in the shoulder joint makes it unstable, and therefore prone to injury.



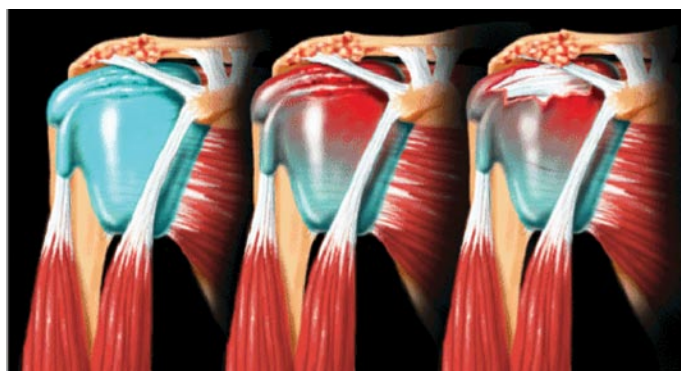
The shoulder joint relies on muscles for its stability. There are big muscles on the outside (pectoralis major, latissimus dorsi and deltoids) which give the strength and movement to the shoulder joint in activities such as reaching overhead and lifting. There are also four smaller muscles known as the rotator cuff that surround and protect the shoulder joint.

When one of the rotator cuff tendons gets caught between the bones of the shoulder joint when raising the arm over the head, it can cause a 'catching' pain as the arm is raised. As time goes on, it can progressively worsen and restrict range of movement. This condition is often associated with sports or activities that involve repetitive overhead actions (e.g. tennis, swimming, cricket and weight training), but can happen to anyone.

The most common complaint is aching in the top and front of the shoulder, or on the outer side of the upper arm. The pain usually increases when the arm is lifted above shoulder level. Frequently, the pain seems to be worse at night.

There are many factors which can cause rotator cuff injury:

- Over-using the shoulder, especially if you're not used to the activity
- Poor sporting technique
- Weakness of the stabilizing and rotator cuff muscles in the shoulder
- Poor posture
- Some abnormal bone growth in the shoulder.



Treatment Required

- Rest – This condition usually needs a period of rest or modified activity to prevent the rotator cuff from being further damaged.
- Ice – in the initial phase of recovery the aim is to reduce inflammation and pain. Consult a Doctor for anti-inflammatories and painkillers if necessary.
- Physiotherapy – in the form of massage, mobilisation and other pain relieving treatments will help.
- Gentle movement – as much as possible without stimulating pain.
- Once the pain is gone, start strengthening the muscles which have become weak, especially the rotator cuff muscles. **DO NOT OVERWORK THE MUSCLES**, or you will go back to stage one.
- Get advice from your physiotherapist on when to start which exercise

Return to activity

As with all injuries, it is important to make a gradual return to activity or sport as the healing tendons allow. Get coaching to correct any faults with your technique, which will hopefully prevent the condition from reoccurring in the future.

What else can be done?

In severe cases of shoulder impingement, or where the bursa is inflamed, a corticosteroid injection into the shoulder can help to reduce the inflammation. This can be done by a shoulder specialist, or by some GPs.

When a rotator cuff tendon has been completely torn, surgery is required to repair the damaged tendon. Following surgery, it is most important to gradually regain full movement, to strengthen the shoulder, and correct any biomechanical faults, ensuring that the problem doesn't reoccur.