

## Frozen Shoulder

### What is Frozen Shoulder?

Frozen shoulder is a common condition where your shoulder becomes painful and then very stiff which limits your movement in most directions. The stiffness may affect your ability to carry out everyday activities. In particularly severe cases, you may not be able to move your shoulder at all. The condition can be very painful and debilitating but does improve with time.

### Facts about a frozen shoulder

A frozen shoulder affects about 1 in 50 adults at some stage in their life and is most common between the ages of 40 – 60. It is slightly more common in women and those with diabetes. The shoulder joint is covered by a thin tissue called a capsule (see figure 1). With a frozen shoulder, this capsule becomes inflamed and painful then contracts or 'tightens' which leads to the shoulder not moving freely. This may affect simple everyday tasks such as driving, dressing or sleeping. Even scratching your back or putting your hand in a rear pocket may become very difficult.

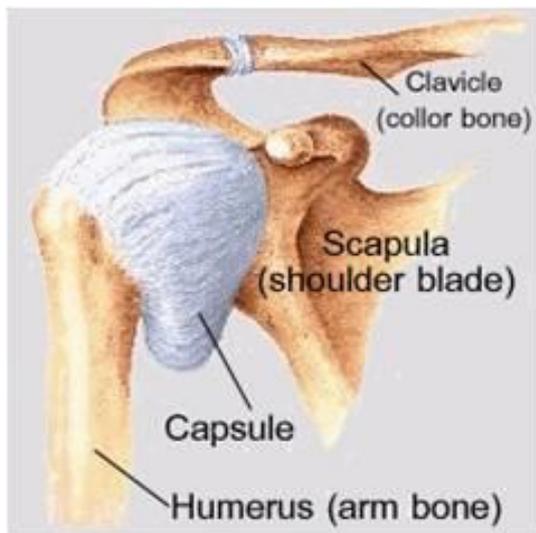


Figure 1: Capsule of the Shoulder

### There are 3 phases of a frozen shoulder:

**Phase one:** the 'freezing', painful phase: The first symptom is usually pain. The movement of your shoulder gradually reduces, while the pain increases.

**Phase two:** the 'frozen', stiff phase: There is less pain, but the stiffness and limitation in movement remain and can get worse. In this stage, once the pain has settled it is helpful to gently move your arm to prevent it from becoming stiffer.

**Phase three:** the 'thawing', recovery phase: This may last for many months and up to 3 years. The pain and stiffness gradually go and movement returns to normal, or near normal.

### *What can I do to help myself to get better?*

**Getting the balance right between rest and activity:** It is important to identify activities that may be making your symptoms worse, such as sharp sudden movements. Try to

change or adapt any movements that might be causing your pain or making it worse. Try to keep your shoulder moving within your pain limits to stop it getting stiff.

**Painkillers:** Over the counter painkillers may be helpful, such as paracetamol, ibuprofen or creams that you can buy at the chemist. Your pharmacist will be able to give you expert advice.

**Shoulder exercises:** It is important to try to keep your shoulder gently moving to avoid it becoming any stiffer. Regular exercises and stretches can be helpful to keep your shoulder and arm as flexible as possible (see separate frozen shoulder exercise leaflet).

It is normal to feel aching or stretching when undertaking the exercises. If the pain becomes very intense and lasts more than 20 – 30 minutes afterwards, do them less or with less force.

### *How long will it take to get better?*

The recovery process can sometimes take several months or years with the average time span being 18 months.

### *How can a clinician help?*

If your shoulder is no better after six weeks you may need to see your doctor. Your doctor may prescribe you stronger painkillers. You may also be referred for physiotherapy.

**Physiotherapy:** A physiotherapist can give expert advice on the best exercises to use. They may try other pain-relieving techniques, such as warm or cold packs or manipulation to the joint.

**A steroid injection** into the shoulder joint can be helpful for pain relief. A steroid works as a strong anti-inflammatory to help the symptoms of pain. This may then allow you to move your arm further and improve your function. Most people notice a significant improvement in their pain although some people need to have another injection if they don't have good pain relief. These injections are either carried out in the shoulder clinic or are sometimes performed under an x-ray or scan.

**Hydrodilatation** is also an effective injection which can be used in some circumstances if the initial steroid injection does not work and you still have a lot of stiffness in your shoulder. Saline (salt water) is injected into the joint to distend the capsule which then allows more freedom of movement.

**Surgery:** Most people recover from a frozen shoulder over time but a small percentage may need an operation to help with their movement and pain. There are 2 main operations that are carried out for a frozen shoulder.

**Manipulation under anaesthetic or MUA:** The surgeon manually moves the shoulder and releases the capsule tightness whilst you are under an anaesthetic so you do not feel the procedure.

**Arthroscopic capsular release:** This is 'keyhole' surgery done under general anaesthetic which involves releasing the tight capsule.