

Frozen Shoulder

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What is a Frozen Shoulder?

If you're having trouble lifting your arm above your head, reaching across your body or behind your back, you may have a problem with the range of motion in your shoulder. Limited motion is an early symptom of a frozen shoulder, which is a general term that covers all causes of shoulder motion loss.

Frozen shoulder affects more women than men, and symptoms usually begin to appear between the ages of 40 and 65. It affects 10 to 20 percent of all diabetics, and other predisposing factors include: a period of enforced immobility, resulting from trauma, overuse injuries or surgery; hyperthyroidism; cardiovascular disease; clinical depression; and Parkinson's disease.

Causes and Symptoms

The cause of frozen shoulder is unknown, but it probably involves an underlying inflammatory process. The capsule surrounding the shoulder joint thickens and contracts. This leaves less space for the upper arm bone (humerus) to move around. Frozen shoulder can also develop after a prolonged immobilization because of trauma or surgery to the joint. Usually only one shoulder is affected, although in some cases motion may be limited in both arms.

Frozen shoulder develops slowly, and in three stages

Stage One: Pain increases with movement and is often worse at night. There is a progressive loss of motion with increasing pain. This stage lasts approximately two to nine months.

Stage Two: Pain begins to diminish, and moving the arm is more comfortable. However, the range of motion is now much more limited, as much as 50 percent less than in the other arm. This stage may last four to 12 months.

Stage Three: The condition begins to resolve. Most patients experience a gradual restoration of motion over the next 12 to 42 months; surgery may be required to restore motion for some patients.

Treatment Options for Frozen Shoulder

Your physician will test the range of motion in your arm and may use an X-ray to rule out any underlying condition. Frozen Shoulder treatment is geared to relieving the discomfort and restoring motion and function to the shoulder.

Options may include:

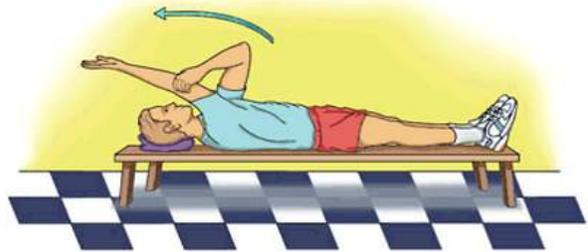
- Medications (such as aspirin or ibuprofen) to reduce the inflammation and relieve the pain
- A program of physical therapy, often combined with home exercises and other therapies, to stretch and help restore motion and function
- Heat or ice therapies
- Corticosteroid injections
- Stretching exercises, such as those described below, done several times a day

Surgery is an option, but only if there is no improvement after trying other options. Arthroscopic surgery can successfully release and repair the shoulder, but it must be followed by an exercise program to maintain motion and restore function.

Frozen Shoulder Exercises

If you have a stiff shoulder, see a shoulder specialist to make sure you do not have any internal injury before starting any exercise program. It is important that you follow your physician's instructions carefully, especially regarding an exercise program. With your doctor's approval, you can do these simple exercises to help stretch and keep your shoulder mobile:

Overhead stretch: Lie on your back with your arms at your sides. Lift one arm straight up and over your head. Grab your elbow with your other arm and exert gentle pressure to stretch the arm as far as you can.



Cross-body reach: Stand and lift one arm straight out to the side. Keeping the arm at the same height, bring it to the front and across your body. As it passes the front of your body, grab the elbow with your other arm and exert gentle pressure to stretch the shoulder.

Towel stretch: Drape a towel over the opposite shoulder, and grab it with your hand behind your back. Gently pull the towel upward with your other hand and you should feel the stretch in your shoulder and upper arm.

