Thawing the Frozen Shoulder

By Joan Ward, P.T.

Is your shoulder freezing, frozen, or thawing? If have suffered from a frozen shoulder, you are all too familiar with these terms. Frozen shoulder syndrome (adhesive capsulitis) is a poorly understood and painful condition. People between the ages of forty to sixty years old are most likely to develop a frozen shoulder, but no one seems to know why. It may occur after an injury or surgery, but often it appears to start for no reason at all. For years, frozen shoulder syndrome has been thought of as a "self-limiting condition" by the medical community, meaning it will go away in time. However, new treatments and research are attempting to thaw the frozen shoulder mystery.

Very little is known about the true cause of frozen shoulder syndrome. Newer research is focusing on the link between hormonal changes in mid-life and frozen shoulder syndrome. What we do know is that a frozen shoulder typically follows a pattern. In the early stages, flexibility and pain get worse. Movement becomes very restricted during the day and pain affects sleep at night. For these reasons, the first stage has been labeled the "freezing" stage. About one third through the process of a typical course of frozen shoulder syndrome, the flexibility loss and pain hit a plateau ("frozen stage"). Finally, both the pain and flexibility start to improve ("thawing stage"). Eventually, most "frozen shoulders" return back to normal, but it takes an average of 30 months! That's a long time to suffer.

Historically, research has show that aggressive rehabilitation does not shorten the length of frozen shoulder syndrome. More invasive treatments, like steroid shots and manipulation (aggressive stretching under anesthesia) show mixed results. However, newer training and rehabilitation techniques are proving fruitful. Patients are feeling pain relief in one to two treatments and regaining up to thirty degrees of movement their first visit. This can mean the difference between barely reaching the steering wheel and driving without pain again.

Another piece of advanced technology, low level light therapy (laser therapy), is also showing promise. Laser therapy emits light into the inflamed tissue and actually accelerates the natural healing process. Adding laser therapy to an already effective therapy program may result in a faster recovery.

Tips to relieve frozen shoulder pain-

- Let the arm dangle and swing it gently from side to side
- Rest the arm on an armrest or place it in a sling occasionally during the day for relief
- STOP all aggressive stretching and strengthening
- Sit or stand up straight when you move your arm, it creates more space in the shoulder joint and will reduce pain

For more tips or to ask specific questions about frozen shoulder syndrome, call the experts at ActivePT today at 800-287-0171.

Be informed and proactive–

- Think twice before undergoing steroid shots or a manipulation under anesthesia. There are definite risks with both treatments and a recent study in The Journal of Shoulder and Elbow Surgery showed 18 out of 30 patients experiencing tears of the capsule and 4 of 30 had freshly torn cartilage after a manipulation procedure.

- Don't be afraid to jump ship if you don't think you are receiving the most effective treatment available in the area. It is costing you time and money. Compared to medical visits, treatments, and medication, *an effective* physical therapy program can cost you much less, even if the provider is out of network. In Minnesota, no referral is necessary to see a licensed physical therapist.

- Most therapists in Rochester treat all areas of the body instead of specializing in certain conditions. You wouldn't have your family doctor perform a specialized surgery, so why should you expect a physical therapist that does not specialize in shoulders to be highly effective at treating your frozen shoulder. A good question to ask your therapist is, "what percentage of your education and training is in the treatment of shoulder conditions?"

- Be wary treatments that don't give you pain relief in one week or less. Although this is a difficult condition to treat, it's not impossible. You should feel relief and see improvements each visit.