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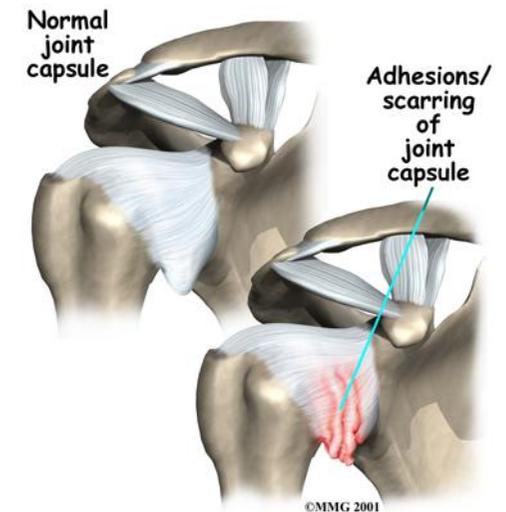


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FROZEN SHOULDER and Osteopathy



The aim of this small leaflet is to explain to you something about the condition of frozen shoulder and how osteopathy can help.

he term frozen shoulder is one of those expressions which has crept into our medical phraseology over many years, but much like the term ‘slipped disc’ is, in fact, very misleading! ‘Frozen shoulder’ has nothing whatsoever to do with anything getting frozen or even cold for that matter, so what are we in fact talking about?

What is a frozen shoulder?

The full and proper name is: ADHESIVE CAPSULITIS, and like most medical terminology, the words can be broken down to at least partly explain the condition itself:

ITIS: ---- implies inflammation.

CAPSULE: ---- the water tight and air tight surrounding of a joint.

ADHESIVE: ---- means that something is sticking to something else.

In other words: there is inflammation in the shoulder joint capsule which causes it to stick together.

The shoulder joint is like the hip joint in that it is a ball and socket joint but whereas the hip is built for weight-bearing and stability, the shoulder is designed for flexibility. The shoulder has a remarkable range of movement allowing you to stretch and move in a vast number of different and complex movements but in doing so it does sacrifice a certain amount of stability.

The capsule, which is so firm and supportive in the hip is much looser in the shoulder, so much so that it has to fold up slightly in the armpit like a small set of bellows and it is here that the problem starts. The condition is still not fully understood but the following is an illustration of a typical scenario:

Surveys have shown that 81% of those affected are over fifty years of age with about the same distribution between male and female. Very often, a minor trauma such as a sudden jerk to the shoulder or reaching backwards to open a rear, car door will be enough to trigger the complaint. The shoulder then becomes stiff and painful over a period of a few weeks.

What is the course of the condition?

The usual chain of events may conveniently be divided into three phases each lasting between four to six months:

The first phase involves inflammation and pain with the shoulder getting progressively stiffer in its movement until, in extreme cases, it hardly moves at all.

In the second phase, the shoulder stays about the same with maybe slightly less pain as long as the arm is kept relatively immobile, but it still remains very stiff.

In the third and final stage, the shoulder gradually improves such that in most cases, if untreated, recovery will occur 18-24 months after the initial onset.

What can be done to help?

Your Osteopath will endeavour to speed up the whole recovery process. It almost always gets better and in a much, much quicker time than if left to its own devices and so can minimise the periods of pain and stiffness. Some find that anti-inflammatory medication from their G.P. in conjunction with osteopathic treatment can also help to get through the first phase a bit quicker.

Treatment involves gentle stretching of the tissues around the shoulder and articulation of the joint in all directions. Your Osteopath will be careful not to push the joint into pain, but rather to work within the pain free range of movement

Advice on specific exercises may be given if thought necessary and also any further instructions to aid recovery which may be pertinent to your particular circumstances. A peculiarity of frozen shoulder is that in about 13% of cases, the other shoulder becomes affected as well but usually not so severely and yet no-one knows why this happens.

This is of course a very brief resume, so please feel free to contact us at one of the practices if you have any further questions about frozen shoulder, or indeed about osteopathy in general.

