

FROZEN SHOULDER (ADHESIVE CAPSULITIS)

A Frozen shoulder (adhesive capsulitis) is a condition that causes severe pain, stiffness and loss of movement within the shoulder joint. This is as a result of inflammation and capsular adhesions that occur in the ball and socket joint of the shoulder.

A frozen shoulder generally occurs over three stages; freezing, frozen and thawing.

The freezing phase is often associated with constant pain and reduction in shoulder range of movement. This phase may last from 6 weeks to 9 months.

The frozen phase is associated with increased stiffness of the shoulder joint. Pain has subsided and generally only occurs at the end range of movements. This phase can last from 4 to 9 months.

The thawing phase is the last phase. There is resolution of shoulder stiffness, and restoration of functional movement. Pain has generally fully subsided by this stage. This phase generally last from 5 to 24 months.

Why does it happen?

The underlying cause of a frozen shoulder is currently unknown. Some of the risk factors for developing a frozen shoulder include being female, middle aged, are stressed, have diabetes, thyroid problems or post-shoulder injury or surgery. Inactivity of your shoulder joint can also lead to a frozen shoulder.

What will a physiotherapist do?

A physiotherapist will first do a thorough assessment of your shoulder to determine whether your pain and stiffness is due to frozen shoulder or as a result of other shoulder injuries or problems.

A physiotherapist can help you manage your pain and maintain as much range of movement within your shoulder as possible. They use techniques such as shoulder mobilization, soft tissue massage, dry needling, electrotherapy, taping and exercises. They also provide advice regarding activity and function, and liaise with your general practitioner if required.

What about activity?

In the early stages of a frozen shoulder you may need to decrease some activities with the affected limb. You may not need to completely stop work or leisure activities but these may need to be modified in order to complete them safely. Your physiotherapist will provide advice regarding return to work, sport and leisure activities.

Outcome

A frozen shoulder may take from 1 - 2 years to completely resolve. Medical and surgical treatments such as a hydrodilatation injection, manipulation under anesthetic or capsular release surgery should be considered in some cases that fail to respond to conservative management.

