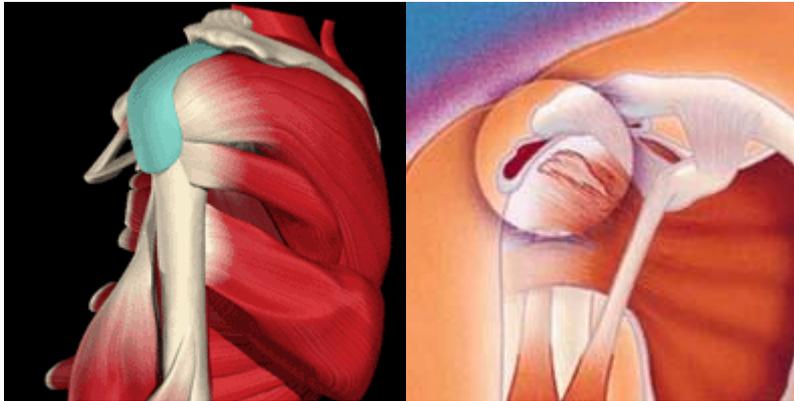


Rotator cuff injuries;



The shoulder joint is one of the most commonly injured joints in the body. Whether it is during a sports game, gardening or even a fall, it can be a very frustrating injury for the patient.

The shoulder is a ball and socket joint, and gives up a lot of its stability to allow us to have a large range of motion and flexibility with our upper limbs. The shoulder has a large ball head of the humerus with a small socket, as opposed to the hip which has a large socket and smaller ball inside making it a lot more stable.

The surrounding tissues give the shoulder its stability, this includes the ligaments and joint capsule, and most importantly the rotator cuff muscles.

The rotator cuff muscles are a group of 4 muscles originating from the shoulder blade and attaching to the humerus (arm bone). These hold the ball in the socket and support the joint.

These muscles are called supraspinatus, infraspinatus, subscapularis and teres minor. These 4 are generally known as the rotator cuff muscles. The most commonly injured muscle is supraspinatus which runs across the top of your shoulder blade, and the top of the shoulder joint.

The rotator cuff is often injured by a movement which involves external rotation (turning your arm outwards) and abduction (lifting your hand away from your body). For example; starting the lawn mower, reaching out quickly to grab something or steady yourself when you lose balance. The other common cause is a fall on to an out stretched hand.

The rotator cuff is often torn in people over the age of 50 with these activities. A tear is unusual in a younger person due to the elasticity of the tendon, but not unheard of.

If the rotator cuff has small tears, these will often heal on their own with treatment, but a large tear will require surgery. Rotator cuff tears are diagnosed with Ultra sound scans. Your physiotherapist is able to refer you for an ultrasound scan and an x-ray if they believe you have a tear, you do not have to see your GP for this. They are also able to refer you to a shoulder specialist for a further review.

As well as tears the rotator cuff can become strained, like any muscle, over used and also impinged in the joint.

Impingement occurs as a result of repetitive movements, poor posture and biomechanics. The tendon and the bursa become inflamed as a result and therefore get squash/ impinged by the joint when moving your arm away from your body. A bursa is a pocket of fluid which sits under a tendon to stop it becoming frayed on the bone. When there are poor biomechanics in the shoulder, or overuse, the tendons do not sit correctly, therefore rubbing the bursa, and causing inflammation and pain.

There are a number of treatments available for the shoulder which your physiotherapist can go through with you. These include mobilisation to help the shoulder move correctly, massage to increase the healing, stretches and strengthening exercises to correct the biomechanics of the shoulder and postural exercises to encourage correct alignment.

Cortisone injections are often used in the shoulder for pain relief and reduction of inflammation. These are not a 'cure' but a management tool to reduce the pain that is felt in the shoulder and therefore allowing the patient to exercise and correct the true problem. A cortisone injection alone will help with the pain, but there is a high chance of this reoccurring with no corrective exercises.

It is best to seek treatment for the shoulder initially after the injury, instead of waiting and thinking the pain will go. With shoulders, the longer the pain has been present for, the longer it will take to come right. Remember you do not need to have a referral for physiotherapy, you can attend and fill out the ACC forms directly at the Physiotherapy clinic.