

Rehabilitation Exercises

Codmans exercise

Use a 4 pint milk bottle filled with water. Swing it in a back and forth, side to side or circular motion. It will add joint traction. Most people will do this standing up but the exercise can be modified by lying on your tummy with arm hanging down.

Wall climbing

'Walk' with your fingers up a wall or architrave to the highest point possible. Put today's date next to the mark and use this mark to monitor progress week to week.

Clock Face

'Set' your shoulder blades as shown by your practitioner. Start at the centre of the imaginary clock face and keeping the posture point your index finger tip to each of the points returning to the centre of the clock each time. Circulating each point can also be used to encourage prolonged muscle activity.

Theraband exercise

Pull against resistance for five seconds, hold the contraction a further 5 sec then slowly relax during the next 5 sec. Various directions can be done – ask your practitioner which muscles need activating.

Once you are able to do all the above without acute pain you can begin to do more strenuous exercises. A few examples are:

- Push-ups or doing the plank
- Pull-ups
- Captains' Chair

At **best practice chiropractic** our purpose is to help you and your family achieve optimal health by providing you with evidence based advice and treatment to encourage you back to a physically active life.

IMPROVE YOUR SHOULDER



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Your shoulder is made up of the collar bone (Clavicle), shoulder blade (Scapula), upper arm bone (Humerus) and the muscles which move it. It is one of the most mobile joints in the body and therefore is commonly injured. Shoulder problems are often stubborn to recover from, but with the right diagnosis and a dedicated treatment plan most get a very good result.

Signs and symptoms of a problem:

- **Restricted and painful movements.**
- **Pain in the neck to upper arm**
- **Mid Back and neck pain**
- **Difficulty dressing or reaching up**

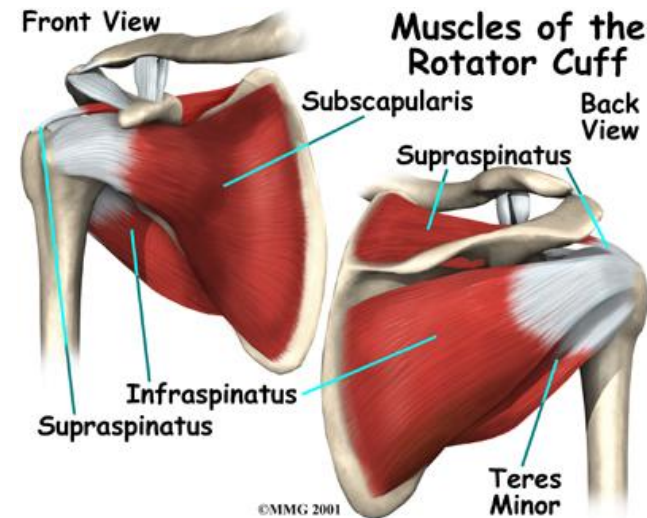
Frozen shoulder (Adhesive Capsulitis)

This is a very common and debilitating condition which usually is divided into three stages. Initially a 'painful stage' that sometimes follows a viral infection, trauma, repetitive use but most often just appears for no apparent reason. The 'freezing stage' is when the stiffness gradually increases and the joint begins to become increasingly immobile. The third stage is the 'thawing stage' where mobility begins to return and pain subsides.

Each of these stages can last up to 9 months meaning that from the start of symptoms to full recovery it can take more than two years! The right and timely treatment can often significantly reduce your suffering and speed up your recovery time.

Impingement syndrome (Supraspinatus Tendinitis)

This condition is caused by the pinching of a tendon deep in the shoulder. Sometimes this is the result of an old trauma and the presence of a bone spur which 'nips' the tendon when the arm is moved to the side to about horizontal. Muscles often pull the shoulder forward into a 'round shouldered' position to ease the nipping' but this results in compensatory muscle spasm.



Bursitis

A bursa is a small fluid sac acting as a shock absorber between two structures. The bursa can become swollen and inflamed due to a trauma or due to being put under excessive pressure over a period of time.

Rotator Cuff Dysfunction

The rotator cuff is a collective term for four muscles moving the shoulder. The four muscles are Supraspinatus, Infraspinatus, Teres Minor and Subscapularis. They all

rotate the upper arm bone (Humerus in relation to the shoulder blade) but are also important in keeping the gaps open in the shoulder when raising the arm for overhead movements.

Muscle Tears / Tendon tears

Muscles can be torn from a sudden overexertion or slowly due to 'wear and tear' as commonly is the case when there has been a bone spur rubbing on the soft tissue. Some muscle tears require surgery whereas others can achieve a good recovery with the right type of treatment and rehabilitation.

The above conditions can be experienced on their own, but often there is an overlap between them.

Treatment

You can either mask the symptoms with painkillers or anti-inflammatory drugs or combine this with treating the underlying problem. Treating the cause will usually get the best long term result and with stronger muscles you will be less prone to recurrences.

Useful Advice

Use ice or heat as directed. Avoid peak exertion till you are told it's OK to do so. A supportive pillow for your neck can take some of the strain off the shoulder during the night by you lying on the shoulder blade rather than the arm. Follow the advice given even though the shoulder feels better – it is given to get you the best possible result.