



Subacromial Pain Syndrome Service User Information Leaflet

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Issue No. 1.37.1.7	Date of Issue: Sept 2016	Review Date: Oct 2022
		If review date has passed the content will apply until the next version is
		published

Produced by Fife Musculoskeletal Physiotherapy Service

Diagrams: ©PhysioTools

Introduction.

The aim of this information sheet is to give you some understanding of your shoulder problem. It will describe the anatomy of the shoulder joint, problems that occur in the shoulder and the treatment options.

About Your Shoulder.

The shoulder joint is formed between the top of the arm bone and a shallow socket. The socket is part of the shoulder blade. Above this is the collar bone. The collar bone forms a joint with part of the shoulder blade called the 'acromion'. The joint between the collar bone and shoulder blade is the 'acromioclavicular' joint. There are ligaments between the bones and together these form an arch above the shoulder joint. The space beneath the arch is called the subacromial space.



In the subacromial space is a group of tendons called the rotator cuff tendons. These are involved in movements of the shoulder. Above the tendons is a fluid filled sac called a bursa. The bursa allows for smooth gliding of the tendons as they pass beneath the arch during overhead movements of the shoulder.

What Can Go Wrong?

The shoulder is one of the most complex joints in the body. It depends almost entirely on the rotator cuff muscles to maintain stability. The shoulder structure combined with its extreme range of motion make the shoulder prone to a number of injuries. The most common problem of the shoulder is subacromial pain.

Subacromial pain syndrome.

In a normal shoulder there is plenty of room in the subacromial space. This means when lifting the arm above shoulder level the tendons do not rub. If the space is decreased by age related change and repetitive movements the tendons may become irritated between the shoulder and the acromion. Tears in the tendons can also develop gradually over time.

Causes

There can be many reasons that you develop this condition. They can include trauma, age related changes or overuse. Sometimes there is no obvious cause. 20% of people will develop symptoms at some time in their life. It is most common in middle aged people.

Symptoms.

The main complaint is pain in the upper arm on specific movements or activities. These are usually movements that involve lifting the arm above shoulder level. For example, putting a coat on, brushing hair or reaching up to a shelf can cause problems. Pain can disturb sleep. It may be difficult to lie on the affected shoulder. As time goes on the shoulder muscles can become weak and the joint become stiff.

Treatments.

Self help.

- Avoid the activity that aggravates the pain (especially if this involves overhead activity) or find a different way of doing it.
- Wrap an ice pack in a cold damp towel. Apply the cold pack to the affected shoulder for 10 minutes. Periodically check to make sure you don't give yourself an ice burn.
- Take any pain medicines regularly as prescribed by your health care professional.
- Try the exercises suggested in this leaflet.

Physiotherapy consists of advice and exercises to stretch the shoulder and strengthen the rotator cuff. Exercises to help control the shoulder blade are also needed to ensure good recovery. Rehabilitation for this condition normally takes 6 – 9 months to improve.

Anti-inflammatory medication may also help.

Injections are sometimes used to decrease the inflammation and ease pain.

Surgery is only used if your shoulder has not responded to non surgical measures. Non surgical treatments have been shown to be as effective as surgery.

Exercises

These exercises should feel like you are working the muscles but they should not significantly increase your pain. Your physiotherapist will guide you with which specific exercises are suitable for your shoulder. The physiotherapist will mark the ones you need to do.

To stretch the shoulder joint.



To strengthen the shoulder muscles.



To help control your shoulder blade

	 Lying face down with forehead supported and your hands by your sides Squeeze your shoulder blades together. Lift your shoulders from the floor. Lift your hands and arms from the floor. Lift your head but do not tip it upwards. Hold for 5 seconds, repeat 10 times. 	
	 Stand with good posture Loop a band round a secure support. Hold both ends of the bands. Keep elbows straight and pull the band backwards and outwards. Aim for 3 sets of 10 repetitions. 	
	 Lie on your back Hold a small weight. Keep your elbow straight. Move your arm towards the ceiling. Aim for 3 sets of 10 repetitions. 	
OR	 Standing or sitting Loop a band round a secure support. Hold both ends of the band. Bend your elbows. Pull the band back. Aim for 3 sets of 10 repetitions. 	
	 Standing Lean over a table. Hold a small weight. Bend your elbow and pull the weight back. Pull your shoulder blade back. Aim for 3 sets of 10 repetitions. 	

For Further Advice:

www.nhsinform.scot/illnesses-and-conditions/muscle-bone-and-joints

For free and confidential advice about work call the Healthy Working Lives Adviceline on 0800 019 2211.

Physical Activity Advice www.healthscotland.com/physical-activity.aspx

Physical Activity Health Benefits http://www.youtube.com/watch?v=aUaInS6HIGo