

Self Help for Frozen Shoulder

Information for patients

What is a frozen shoulder?

The shoulder joint is a ball and socket joint and the joint is surrounded by a structure called a joint capsule. The joint capsule is usually very mobile and flexible, moving freely as you move your arm. A frozen shoulder is when the joint capsule becomes inflamed, thickened and stiffer, subsequently causing pain and loss of movement at the shoulder joint. A frozen shoulder is also described as adhesive capsulitis, a stiff shoulder or a contracted shoulder.

Contributing factors

- Aged between 40 to 60
- Diabetes
- Can happen after surgery or trauma
- Can come for no apparent reason

When to seek medical attention

- A new lump or bump around the shoulder
- Bruising or redness in and around the joint or new multiple joint swellings
- Feeling unwell with a temperature associated with the onset of this problem
- Loss of feeling and power in the arm
- Power loss associated with injury or a fall onto an outstretched hand
- Unusual increase in breathlessness, or new persistent cough since the onset of this problem

Symptoms

Symptoms can vary in intensity both in the day and at night. The frozen shoulder usually starts with pain all around the shoulder and sometimes down the arm. The pain usually improves with time but the shoulder may feel stiffer and you cannot move the arm freely.




What to expect

The frozen shoulder is a self-limiting condition, meaning it usually goes away by itself with time, the majority of symptoms resolve within two years, although occasionally last longer. Physiotherapy can help to speed this up with stretching exercises or other treatments, providing the pain is well controlled. Other treatments that may help the frozen shoulder include steroid injection and in some cases surgery may be required.

Management

- Ensure you keep your shoulder as mobile as you are able, using your arm as much as you can to help with your daily activities
- Adequately control your pain, pain stops you being able to move the arm and may result in the shoulder becoming more restricted. Speak to a pharmacist if you are unsure which medication may help
- You could apply heat or ice to help with the pain and healing. Ensure that you do not apply these directly to the skin. Also do not use them too frequently or for prolonged periods of time (up to 20 minutes), as these treatments can burn the skin
- Try to maintain a good posture

Exercises

Demonstrations	Instructions
<div style="display: flex; justify-content: space-around;"> <div style="text-align: center;">  <p>Start position</p> </div> <div style="text-align: center;">  <p>End position</p> </div> </div>	<p>Stand facing a chair or work surface. Place your hands on the secure object and slowly walk backwards to feel the shoulders move; this should be a gentle stretch as tolerated.</p> <p>Hold this position for approximately five seconds and return to start position. Repeat 10 times, two or three times a day as tolerated.</p>
<div style="text-align: center;">  </div>	<p>Sit or stand with good posture. Start with your elbow bent and tucked in to your side. Use a walking stick or a similar object to help assist the rotation of your affected arm in an outwards direction. Go as far as feels comfortable and ensure your body remains straight and your elbow is by your side.</p> <p>Hold for five seconds. Repeat 10 times, two to three times a day as tolerated.</p>



Sit or stand with good posture. Maintain an upright position as you gently help your affected arm behind your back towards the opposite buttock and then up your back with your unaffected arm.

Hold this position for five second. Repeat 10 times two to three times a day as tolerated.

Frequently asked questions

Am I damaging my shoulder?

You will not damage your shoulder by performing routine daily chores and tasks as best as you can tolerate, the pain with a frozen shoulder does not usually indicate any harm.

Do I need any investigations?

There is no specific test to help diagnose a frozen shoulder, but occasionally your GP or physiotherapist may request further investigations, such as an X-ray.

What can I do if my shoulder does not settle?

If your symptoms have not settled after four to six weeks, you should consider referring yourself to your local physiotherapy department. Physiotherapy self-referral forms are available at your GP reception. Complete the form and return to the reception desk. You will either receive a telephone call or a letter for you to arrange an appointment with the physiotherapist.

This information is available in audio, Braille, large print and other languages. To request a copy, please ask a member of staff.

Reviewed by Readers' Panel September 2018



★ ★ ★ ★ ★
★ We Care ★
★ Because ★
★ You Matter ★

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