

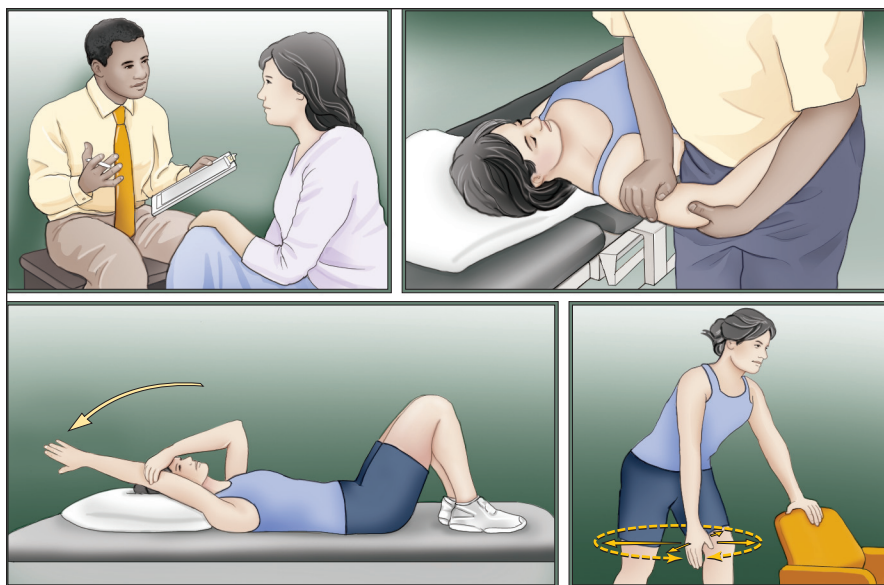
# Frozen Shoulder

## *What Can a Physical Therapist Do for My Painful and Stiff Shoulder?*

*J Orthop Sports Phys Ther* 2013;43(5):351. doi:10.2519/jospt.2013.0503

**F**rozen shoulder, also known as adhesive capsulitis, refers to a condition where the shoulder becomes painful and stiff. It may occur following a relatively minor injury to the shoulder but most often develops without a clear reason. Frozen shoulder can also be linked to other health problems such as diabetes and thyroid disease. With this condition, the pain and stiffness can limit your ability to do simple everyday activities like getting dressed, brushing your hair, or reaching into a cabinet. The condition affects between 2% and 5% of the population at some point in their lives, and typically occurs in adults between 40 and 65 years of age. The problem usually lasts 1 to 2 years.

People with frozen shoulder usually experience an initial period characterized by an achy shoulder at rest, severe pain with movement, and difficulty sleeping because of shoulder pain. This leads to a progressive loss of motion (“freezing”) and limited function of the shoulder over several months, a time when there is often less pain but greater difficulty performing daily tasks. Eventually, the condition starts to “thaw” and shoulder motion and function gradually return. Recently, a panel of experts developed a set of treatment guidelines for improving the quality of care for people with frozen shoulder. These guidelines are published in the May 2013 issue of *JOSPT*.



**FROZEN SHOULDER TREATMENTS.** Several treatment options are available to address frozen shoulder. A thorough evaluation will help define the right treatment approach for your shoulder. In addition to education on the condition, your physical therapist will help determine the right combination of stretching and mobility exercises and joint mobilizations to get you on the road to recovery.

For this and more topics, visit *JOSPT* Perspectives for Patients online at [www.jospt.org](http://www.jospt.org).

This *JOSPT* Perspectives for Patients is based on an article by Kelley MJ et al, titled “Shoulder Pain and Mobility Deficits: Adhesive Capsulitis,” *J Orthop Sports Phys Ther* 2013;43(5):A1-A31. doi:10.2519/jospt.2013.0302.

This Perspectives article was written by a team of *JOSPT*'s editorial board and staff, with Deydre S. Teyhen, PT, PhD, Editor, and Jeanne Robertson, Illustrator.

### NEW INSIGHTS

The expert panel recommends that patients learn about the symptoms that suggest they have frozen shoulder, what to expect as the condition progresses, and the timeline for recovery. They also urge that patients continue to use the affected shoulder during daily activities. In addition, participation in a good treatment program that combines education, mobility and stretching exercises, and joint mobilizations performed by your physical therapist can help manage symptoms and lead to faster recovery of your shoulder motion and function. Heat and other treatments applied to the shoulder can also make mobility and stretching exercises more effective. Finally, your physician may suggest a corticosteroid injection for your shoulder. The combination of an injection with joint mobilizations followed by mobility and stretching exercises has been found to be helpful.

### PRACTICAL ADVICE

If you have frozen shoulder, making sure you continue to move your shoulder the proper amount is key to your recovery. There are a number of treatment options performed by physical therapists—joint mobilization or manipulation, exercise, and heat, among them—to help speed up your healing. Your physical therapist can help you better understand the condition and, after a thorough evaluation, customize a treatment program that will include exercises for you to perform at home to decrease the pain and improve the motion and function of your shoulder. For more information on the treatment of frozen shoulder, contact your physical therapist specializing in musculoskeletal disorders.



**JOSPT PERSPECTIVES FOR PATIENTS** is a public service of the *Journal of Orthopaedic & Sports Physical Therapy*. The information and recommendations contained here are a summary of the referenced research article and are not a substitute for seeking proper healthcare to diagnose and treat this condition. For more information on the management of this condition, contact your physical therapist or healthcare provider specializing in musculoskeletal disorders. *JOSPT* Perspectives for Patients may be photocopied noncommercially by physical therapists and other healthcare providers to share with patients. The official journal of the Orthopaedic Section and the Sports Physical Therapy Section of the American Physical Therapy Association (APTA), *JOSPT* strives to offer high-quality research, immediately applicable clinical material, and useful supplemental information on musculoskeletal and sports-related health, injury, and rehabilitation. Copyright ©2013 *Journal of Orthopaedic & Sports Physical Therapy*®