



Pain Relief Advice

Anti-inflammatory tablets or painkillers may have been prescribed or alternatively can be purchased from your local pharmacy.

These will help with stiffness and pain but may not be suitable for all patients. Paracetamol may be a suitable alternative.

If in doubt you should consult your GP or pharmacist before taking any medication.

Keep all medicines out of the reach of children.

Call now for more information

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Practical Help on the Management of a Frozen Shoulder

This leaflet is designed to supplement the advice given by your GP or Physiotherapist and to help you deal with your present frozen shoulder. The information is written by physiotherapists and based on the latest research

What is a Frozen Shoulder

A frozen shoulder is a common term for a painful and stiff shoulder. Adhesive capsulitis is the medical term for this condition.

A frozen shoulder **is not** a form of arthritis and other joints are not affected. A frozen shoulder can commonly occur for no apparent reason. Sometimes the shoulder may have been bumped or hurt in a fall. This condition is more common if you have diabetes.

This condition has three stages of progression:

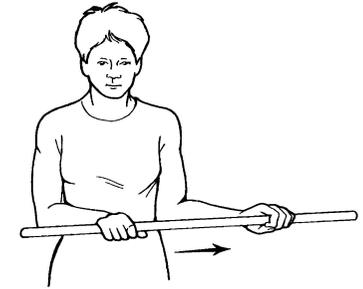
Stage 1 Pain begins in the shoulder region and progressively worsens over a period of a few weeks to several months. The pain may radiate down the arm. The pain is typically worse at night and when lying on the affected side. Shoulder movements may become quite stiff.

Stage 2 Pain gradually eases and becomes more intermittent. Stiffness and limited movements remain. This stage may last 3 to 12 months.

Stage 3 'Recovery Stage' - Stiffness slowly reduces, pain reduces and function returns. This stage may take 3 to 24 months. In a minority of people stiffness and intermittent pain may be experienced for several years.

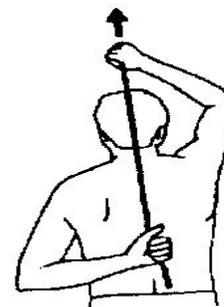
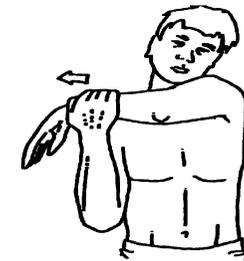
Stand with your elbows bent to 90° holding a stick in front of you. Gently push the stick

sideways across your body. Keep your elbow tucked into your side, feel the stretch in the shoulder. Hold for 20 - 30 seconds. Repeat 5 times, 2-3 times per day.



The following exercises may be helpful in stage 3 as the condition improves.

Stand or sit. Stretch one arm over the opposite shoulder by pushing it at the wrist with your other arm. Hold the stretch for approx 20 - 30 seconds then relax. Repeat 5 times, 2-3 times per day.



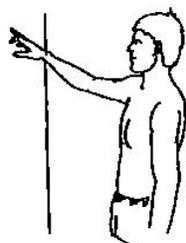
Stand or sit. With one arm bring a towel over your shoulder behind your back. Hold the towel as shown. Gently pull upwards stretching the affected arm behind your back.

Hold for approx 20 - 30 seconds. Repeat 5 times, 2-3 times per day.



Lie on your back with your hands behind your head and elbows pointing towards the ceiling. Gently move elbows apart and down towards the bed. Repeat up to 10 times. Do 2 –3 times per day.

As the pain reduces and movement increases hold this exercise for approximately 20 - 30 seconds to increase the stretch. Repeat 5 times. Do 2 –3 times per day.



Stand facing a wall. Gently ‘walk’ your fingers up the wall as high as possible. Try to relax your neck muscles. Slowly lower your arm down in the same way.

Repeat up to 10 times. Do 2 –3 times per day.

How do I know I have a Frozen Shoulder?

You may experience some or all of the following problems:

- Pain - May be severe and radiate into the arm. Can be present at rest and during movement.
- Stiffness - Movement of the shoulder can be severely restricted in all directions.
- Loss of function - Activities such as dressing, brushing hair and driving may be difficult.
- Sleep - May be disturbed when lying on the affected side or when changing position.

What can I do to help myself?

Self help is normally the best form of treatment - full recovery for this condition may take a long time. The aim of treatment is to ease pain and stiffness and keep the movement of the shoulder as good as possible whilst encouraging the condition to clear.

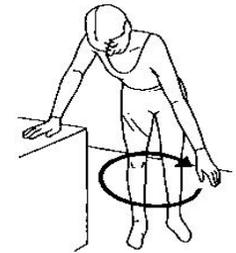
- **Medication** - Anti-inflammatory tablets or painkillers may have been prescribed or alternatively can be purchased from a pharmacy. These may help with stiffness and pain but may not be suitable for all patients. Paracetamol may be a suitable alternative. If in doubt you should consult your GP or pharmacist before taking any medication.

- **Heat** - May be useful. Use a wheat bag or hot water bottle wrapped in a towel for 15 minutes as often as required. Ensure the pack is not too hot to avoid burning the skin.
- **Ice** - some people find ice more helpful than heat. Apply a cold pack for 15 minutes to the affected shoulder. You may repeat every 3-4 hours. Do not apply the ice directly to the skin (place a damp cloth between your skin and the ice to avoid ice burns).
- **Pillows** - Adopt a comfortable position. Lying on the unaffected side with a pillow under the affected arm can be comfortable. You may also place a pillow behind you whilst on your side to prevent you from rolling over.
- **Injections** - A steroid injection into the shoulder may be very beneficial for this problem. Ask your GP or Physiotherapist for further advice.
- **Exercise** —Gentle exercise is advised to **maintain available range of movement** during all 3 stages of the condition and encourage a successful recovery of any lost movement as the condition resolves.

Exercises

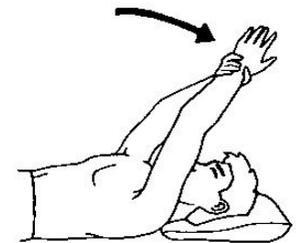
Exercise is advised to **maintain available movement during all 3 stages**. There may be some level of discomfort while exercising, this is normal and pain should ease soon after completing your exercises. If discomfort increases after completion of the exercises then reduce the number of repetitions of the exercises **but do not stop altogether**. If required please ask your physiotherapist for further advice.

Stand leaning on a table with one hand. Let the affected arm hang down. Gently swing your arm backwards and forwards, side to side, and in circles.



Repeat each direction up to 10 times.
Do 2 –3 times a day.

Lying on your back, support your affected arm with your non affected arm with your elbows straight. Use one arm to lift the other over your head, keeping it as close to the ear as possible.



Repeat up to 10 times.
Do 2 –3 times a day.