



Clinic Guides

Frozen Shoulder Pain Relief

Daily Living

What you do with your shoulder on a daily basis is important both for managing pain and increasing the rate of recovery. There are simple things you can consider as you go about your daily life to make the ordeal of your frozen shoulder more bearable.

The instinct we have when something is hurting is not to use the painful area. This may be appropriate for other problems but is not the case for a frozen shoulder.

Most frozen shoulder patients come in holding the arm in a protective posture. They tend to hunch the affected shoulder forward, bending the elbow and cradling the arm close to the body, even supporting it with the other arm. This position is very important to avoid as it only compounds the problem. In this position, the biceps muscle is contracted, stressing the tendon and causing further shortening. It is far better to try to keep the arm straight, allowing the arm to hang down the side of your body. This position stretches the biceps tendon; the weight of the arm also slightly separates the shoulder joint which will allow fluid back into the shoulder capsule.

You can do most activities **but avoid those that you know will cause the sharp catching pain.** Try swinging the arms when walking, don't just hold the arm rigid. Try putting your arm up on the sofa when you are sitting. If you are standing, try leaning against a wall and gently moving your hand higher up the wall. **Use the arm where possible and don't be too afraid. Just try to avoid tweaking the tendon but you will not make it worse.**

Walking

Walking through a busy supermarket or using public transport can be very stressful for a frozen shoulder sufferer. There can be a constant fear of someone accidentally bumping into the shoulder. In that scenario it may be very difficult to avoid being tense and protective towards the shoulder. However, whenever possible, it is important to relax and straighten the arm when walking. The tension caused by fear of pain will only compound the problem. So **relax your shoulder down, straighten the arm, let it swing, breathe and relax.**

Sleeping position

The night pain and consequent sleeplessness associated with this condition are possibly the worst aspects of having a frozen shoulder. However, some comfort if not relief can be obtained by:

- Lying on your back with a pillow lengthways under the affected arm(s) and shoulders, supporting them.
- Lying on the good side with a pillow or towel lying over your waist and under the arm.

Avoid sleeping with your arm above your head as this inhibits tissue repair (which mainly occurs at night).

Ice

Most patients have reported that ice has been particularly beneficial, especially in the acute first and second phases when the inflammatory response is most active.

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You may feel sceptical about this, but so many people have enthusiastically described the relief they felt from applying ice to their shoulders that it's certainly worth trying.

- Wrap some crushed ice or frozen peas in a towel and place over the front of the shoulder joint. Leave it there for ten minutes.
- Let the area rest without ice for ten minutes, repeat.

You can also apply the ice to the back of the shoulder joint, the top, the side or other areas where there is acute pain. It is a good idea to include the front of the shoulder though – even if this area is not painful.

The ice regimen should be repeated as often as possible. When ice is not available or appropriate (at work, cinema etc.) then cold sprays or gels can be useful – ask your pharmacist about them.

NEVER APPLY ICE DIRECTLY TO THE SKIN, IT MAY CAUSE PERMANENT BROWN MARKS.

Heat

In the early stages of a frozen shoulder the direct application of heat is not a good idea, though a warm bath can be helpful. Warm packs / hot water bottles that are not too hot can be applied in the later stages. If you have found heat does give you relief then an alternating cycle of ice/warm/ice can be tried.

Posture

One of the protective postures that people with frozen shoulder adopt is to hunch the affected shoulder forwards, bend the arm at the elbow, and cradle the arm to the body. It is very important to avoid the “sling” position, which only compounds the problem. In this position the biceps muscle is contracted; stressing the tendon and eventually causing shortening. The best thing to do is straighten your arm and allow it to dangle by the side of the body. Use the affected arm as little as possible.

Re-positioning the shoulders

The following Alexander Technique exercise may be useful in re-setting the shoulder posture. Ideally you should do it every day, failing that, try to aim for five days out of seven. It can be uncomfortable at first, but should not be unbearable. If you cannot lie on the floor without severe pain then wait a week before giving it another go.

- Place a duvet or thick towel on the floor and lie on it, face up.
- Place pillows under both elbows and forearms.
- Rest your hands on your stomach, face down - If that's not possible just rest them on the pillows.
- Stay in this position for twenty minutes. (Listen to the radio).
- Very slowly the muscles at the front of your chest should relax -- Allowing the shoulders to drop backwards, towards the floor.

Exercise

Rest is the best thing for the initial phases of a frozen shoulder. Only when the night pain has gone is it a good idea to begin exercising. This is because a lot of pain comes from muscular spasm causing compression of the joint structures and straining tendons. Strengthening muscles through exercise only serves to increase the power of the spasm. Until the initial stages of acute inflammation and protective contraction have passed the best thing to do is use the arm as little as possible. There are, however, a

few gentle stretches and mobility manoeuvres you can do. These can be found on our web site at www.juliawilliams.co.uk or ask in the clinic for details.

Once you start doing the exercises, do try to follow the instructions fully. Doing too much can be just as counter-productive as doing too little. At first exercising may cause discomfort. The muscles aren't used to working and tire quickly. This is to be expected. A warm water bottle, followed by the application of ice will ease these pains. Unless the pain after exercise is very severe it is better to continue than to stop. Simply reduce the number of repetitions.

Swimming

As soon as the night pain is gone it is a good idea to start visiting a swimming pool. At first you may not be able to swim properly but any movement in the water will really help - the resistance of the water will help mobility and improve the strength of your shoulder. If you can't swim, just walk up and down using your arms to help you. Rest frequently and vary your stroke. Stop when you feel tired or if your shoulder is hurting.

When an acute spasm strikes

A sudden movement; reaching for a falling cup, holding a door that is suddenly blown open or even being bumped into on the street can cause a sudden increase in the painful muscle spasms. These acute attacks of "blinding" pain add to the sufferer's already considerable burden by contributing anxiety. Most patients find that they can stop these attacks by doing the following exercise, however, it needs to be understood first.

When an unexpected movement goes through the joint the muscles all lock into protective spasm. This sudden increase in the tone of all the muscles can be reversed by going with the contraction. The muscles no longer 'see' a need for their activity and it is switched off. However, there is quite a fine line between gently going with the muscles and creating a further 'challenge', so remember that the exercise described below is subtle and should be performed slowly and gently.

- Rest the hand on a table or chair back palm down.
- Allow the weight of the arm to rest on the hand, causing slight compression at the Shoulder joint. Breath deeply and slowly. It helps to apply the pressure as you breath out.
- It is as though you were about to lean your body weight on your hand, while only applying a fraction of the force.

Life

As mentioned above, the best position for the arm during the initial stages of the condition is to let the straightened arm hang loosely at your side... that is not to say you should let the frozen shoulder interfere too much with your daily life. In the face of constant pain, sleep deprivation and decreased joint mobility it is very hard to carry on with normal life. One of the really unpleasant aspects of having a frozen shoulder is the sense of isolation that the above symptoms frequently cause. 'My shoulder really hurts' doesn't come close to describing the ordeal. It is very hard indeed for people to understand what you are going through. Such circumstances naturally render one vulnerable to depression. In order to combat this it is vital to stay as fully engaged with your life as possible. Be patient with your loved ones when they pester you with constant enquiries about your wellbeing while expecting more of you than

you are able and 'leave you in peace' just when you would like some sympathy. Most people are not good at dealing with the pain of others, especially someone they love.

Be sure to set out very clear guidelines about what can and can't be expected of you at work.

Maintaining factors

There is an unspoken contract between each patient and practitioner; that we will do our best to rid you of your symptoms as fast as possible. Our good reputation depends upon it. However, all our best efforts are greatly improved by your continued work at home. Please accept your part of the bargain; that you will try to apply the advice found on these pages. Just think of each week when you do follow our advice as being equivalent to getting a free treatment because it will reduce the number of sessions you need to pay for. Really.

Also try to watch out for bad habits that contribute to the severity of your symptoms. These are often unconscious and include making repeated circular movements with the elbow, forcing the arm into an uncomfortable stretch, tensing the elbow against the side of the body, leaning your elbows on your desk, holding the arm in the sling position, not drinking enough water, carrying a heavy bag on one shoulder and tensing into the discomfort. When pain strikes it is vital that you take a deep breath and let the muscles relax as you breath out.

The light at the end of the tunnel

Patients usually feel a good enough improvement at the end of their first session to give them hope. However the initial improvement is usually short lived – from a few hours to a couple of days. You may also notice a slight aggravation of your symptoms, these are only the after effects of the treatment itself. It is perfectly normal to feel a bit battered, so do not worry.

After each session the benefits should last a little longer. However, no two patients are quite the same. The treatment will accelerate you through the condition, not stop it in its tracks. If you are starting from the beginning of phase one, you may get a bit less movement or a bit more pain initially. It is sometimes the case that movement in one particular direction is slow to respond, or that the night pain continues even when people are relatively pain free during the day. Some regain lost movement quickly but still experience pain. Others are pain free after only a short time, but continue to grapple with the disability of limited movement. There is often a 'plateau' when little change occurs. All these patients end up the same – with little to no pain and a functional if not full range of movement. Of those few patients who we have failed to cure completely, a good percentage report a degree of improvement such that they were able to live more normal lives. Don't lose heart.

Some Exercises to Try (please ask if you require advice on practising these exercises)

Shoulder Retraction: Turn your hands palm outwards, squeeze your shoulder blades together and let your hands come back to your sides. Hold for 3 seconds, relax and repeat.

Capsule Stretching: Bend forward at the waist and rest your good arm on a surface. Let your affected arm hang down towards the floor. Allow your arm to gently swing for no more than 1 minute.



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