

# ADHESIVE CAPSULITIS

- Adhesive Capsulitis, or “Frozen Shoulder”, is a common condition where the capsule (lining) of the shoulder becomes irritated and shrinks, causing pain and stiffness.
- It affects 3-5% of the general population and up to 20% of people with diabetes and also commonly affects people with thyroid disease, hypertension and hypercholesterolemia
- Frozen shoulder occurs more frequently in people over the age of 40 and affects females more often than males.
- The cause of Frozen Shoulder is unknown, however it commonly develops after injury (minor or major) and can also occur following breast or other surgery.
- Usually Adhesive Capsulitis generally resolves by itself, but can take 2+ years to do so.
- Frozen Shoulder is described as having 3 phases
  - Freezing Phase
    - Painful and progressive loss of movement
  - Frozen Phase
    - Stiffness of the shoulder with pain usually confined to end of range movements
  - Thawing Phase
    - Not usually painful, with progressive increase in movement
- For most people, the pain completely resolves but some people are left with a small loss of flexibility of their shoulder

## Treatment

- Exercise is important throughout the course of Adhesive Capsulitis, in order to attempt to maintain as much flexibility as possible while the shoulder is freezing, and then to restore normal movement and strength once it thaws. Physiotherapy is therefore advisable.
- Through the painful phases, regular pain-reducing and anti-inflammatory medication may be required
- Corticosteroid injections into the shoulder may provide some temporary relief from pain and may potentially change the course of the condition
- A hydrodilatation is a procedure where a doctor injects fluid into the shoulder joint to stretch out the capsule, which can free up the shoulder to move. It is usually used when the pain and stiffness are at their worst and may speed up the return of normal flexibility. A hydrodilatation is not a quick fix and should be accompanied by stretching exercises afterwards to preserve the resulting additional flexibility.
- Surgery is rarely performed and reserved for where there is ongoing stiffness.

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Disclaimer: This health information is for general education purposes only and is intended to be a reminder of education provided by your health professional after a thorough examination.



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- Complete each exercise for 3 lots of 10 repetitions in each direction (with a brief rest between each lot). Repeat twice per day

## 1. Arm Swings

- a. Forwards / Backwards
- b. Left / Right
- c. Circles Clockwise / Anticlockwise

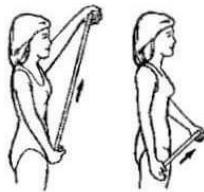


## 2. Crawl / Slide up the wall

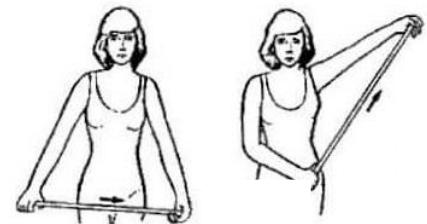


## 3. Use a stick to assist movement

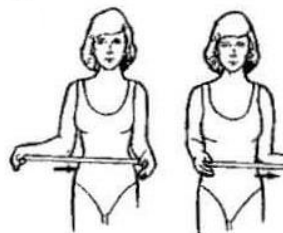
### a) up/forwards



### b) up/sideways



### c) turning out



See a physiotherapist for guidance on progression of exercises

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