ORTHOPEDIC SPINE THERAPY



Top Six Reasons Why Your Shoulder Pain Isn't Going Away By Pat Schuh, DPT, CMTPT Orthopedic & Spine Therapy of Kaukauna

The shoulder is a unique joint that needs to provide enough mobility to help us accomplish our daily tasks while also providing enough stability to help us lift heavy things and throw stuff! To meet these demands, the shoulder consists of a shallow ball and socket joint (to provide mobility) with numerous muscles and ligaments (to provide stability). Because there is more stress placed on the muscles and ligaments of the shoulder than on the bones themselves, the shoulder is a common region of musculoskeletal pain. Depending on the causes, some people with shoulder pain find relief from various therapies while others find no relief at all. It is important for people to understand that multiple factors can cause shoulder pain. Understanding the interactions between the muscles and joints of the shoulder region will help your healthcare provider properly diagnose and treat your injury. Below is a list of six simple, yet often overlooked causes of shoulder pain that should be considered in any rehabilitation program.

1. **Poor Posture**. Yes, your elementary school teachers were correct - posture is good for your health, particularly your shoulder health! Try this experiment: sit on the edge of your chair and slump forward letting the tension out of your head, neck and shoulders. Now, try raising your arms straight up overhead. Note any tension increase in your shoulders, upper back and neck. Next, sit up straight and repeat the movement reaching your arms up overhead. If you find this easier, this is because by sitting up straight, the space between your arm bone and shoulder blade bone increases enabling you to lift your arms higher without compressing any tissues. Your muscles function better in this position.

This exercise demonstrates the importance of maintaining good posture while working overhead, playing overhead sports and even using a mouse at a computer desk. Maintaining correct posture for prolonged periods of time requires that you have adequate mobility and strength in your upper back, chest and shoulder blade muscles. Adjusting work stations can be very important as it reduces the amount of time you need to be in stressful positions. Simple adjustments, such as lowering your work to chest or waist level, raising or lowering computer desks and chairs so your keyboard is easier to use, and keeping your mouse close your body can affect ones shoulder pain almost instantaneously. A physical therapist is trained to evaluate your spine, muscles and workplace set-up for proper functioning.

2. **Respect your pain.** When it comes to shoulder pain the "no pain, no gain" mantra does not apply! Mistakenly, many people with shoulder pain try to push through the pain during daily routines or exercise, thinking it needs to hurt before it gets better. Shoulders are relatively delicate joints and many painful conditions can arise from shoulder over-use. Therefore, the worst thing you can do to a painful shoulder is use it more! Instead, it is recommended to "actively rest" your shoulder. This means use it as much as you need to, complete gentle stretches, but don't let the pain get above a 3 out of 10 in intensity (if a 10 out of 10 was the worst pain imaginable). Your physical therapist or healthcare provider can educate you about proper

shoulder strengthening exercises that will not flare-up your painful symptoms. This will get you back to the activities you love sooner and with less pain.

3. Over compensation. Muscle imbalances occur when we over-use muscles on one side of a joint. This can place passive tension on the bones and affect their alignment. Faulty alignment can lead to joint and soft tissue injury as well as functional weakness in the muscles. It is common for people to rely heavily on chest and front of the shoulder muscles while underutilizing upper back and shoulder blade muscles. A physical therapist can determine if these muscle imbalances exist and suggest appropriate exercises to reverse these imbalances.

4. **Roll over**. Many patients experience significant shoulder pain after a night's sleep. A simple suggestion is to have them sleep on their "good" shoulder! It makes sense that if you sleep on the same shoulder every night and your tissues are compressed 8 hours a night 365 days a year they are likely going to have less circulation which leads to slower healing, weakened tissue and excess compression on the joints.

5. Your hobbies don't match your anatomy. Your anatomy may not be conducive to the activities you are doing. Some people simply have variations in the shape of their shoulder blade bone. These people may have less space between their rotator cuff and the bone, which causes their tendons to pinch between the arm and shoulder blade when they reach overhead. Other people have laxity or looseness in their ligaments that leads to joints that are very mobile. These people need to rely on their rotator cuff muscles, more than the average person, to keep their shoulder joint from dislocating. They typically injure themselves when they put excessive stresses on their shoulders while lifting heavy objects or forcefully throwing things or swinging rackets. In extreme cases, surgical interventions may be required to fix these anomalies, but most patients should be able to overcome these impairments with the help of a rehabilitation program, combined with activity modifications. An x-ray can typically help identify if these abnormalities are present.

6. **Respect those Trigger Points**. The final reason your shoulder may not be getting better is because of trigger points. Trigger points, or taut bands (also known as knots), are regions of muscles that are more or less stuck in the *on* position. These points create constant tension in a muscle area, which limits its blood flow to that area. The end result is pain and weakness in the muscle and the surrounding areas. It is very common to find painful trigger points in an injured shoulder area. Treating these points with soft tissue manipulation or trigger point dry needling can resolve much of the tenderness a patient is experiencing. Unfortunately, trigger points are often overlooked as significant sources of pan in rehabilitation sciences, which is why treating them in patients with chronic pain can be very effective.

In summary, shoulder pain can be a complex condition with many different causes. It is important that your healthcare provider is aware of these various causes, can identify them and has the ability to address them through hands on treatments, instruction in home exercises and education in activity modifications to decrease your pain and improve your shoulder function.

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