



Adhesive capsulitis/Frozen Shoulder

Adhesive capsulitis, also known as frozen shoulder, is a condition that affects the shoulder joint, causing stiffness and limited range of motion. This patient education guide aims to provide you with information on adhesive capsulitis, its causes, symptoms, diagnosis, treatment options, and self-care measures.

1. Understanding Adhesive Capsulitis:
 - Adhesive capsulitis occurs when the tissues surrounding the shoulder joint become inflamed and, as a result, become stiff.
 - The exact cause is often unknown, but certain factors such as diabetes, thyroid disorder, previous shoulder injury or surgery, and prolonged immobilization can increase the risk.
 - Frozen shoulder also goes through phases including: freezing, frozen, and thawing.
2. Recognizing the Symptoms:
 - Persistent shoulder pain that worsens with movement.
 - Gradual loss of shoulder range of motion, making it difficult to perform daily activities like reaching towards a back pocket, dressing, or combing hair.
 - Stiffness and a feeling of tightness in the shoulder joint.
 - Discomfort during sleep, especially when lying on the affected side.
3. Treatment Options:
 - Non-surgical approaches: Most cases of adhesive capsulitis can be managed conservatively with either home exercises or exercises performed under the guidance of a physical therapist.
 - Surgical options: In severe cases where conservative treatments fail, surgical interventions like manipulation under anesthesia or arthroscopic release may be considered.
4. Importance of Rehabilitation:
 - Consistent participation in physical therapy exercises is crucial for a successful recovery.
 - Rehabilitation is focused on stretching the inflamed and contracted shoulder capsule.
 - Cortisone injections may be helpful to improve pain, but there is no substitute for shoulder stretching.



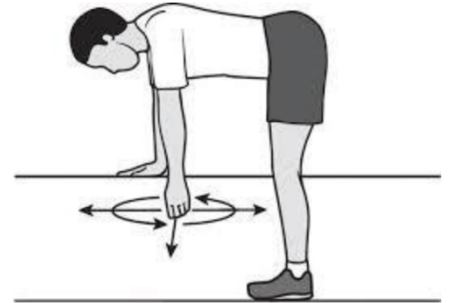
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Rehabilitation

Each phase of these exercises will focus different parts of the shoulder capsule. Each exercise should be completed **3-5 times** per day. Consistency is **KEY**.

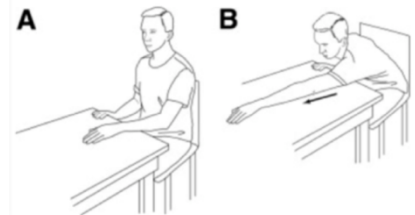
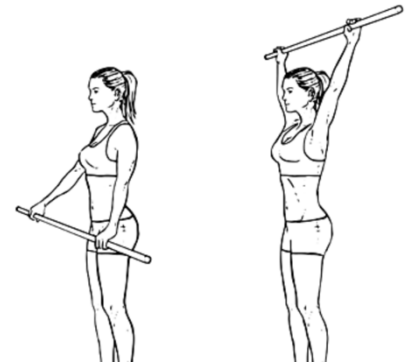
Warm-up: **Pendulum exercises**

- Stand next to a table or sturdy surface and bend forward at the waist.
- Support your non-affected arm on the table for stability.
- Allow your affected arm to hang freely.
- Gently swing your affected arm back and forth, side to side, and in circular motions.
- Perform this exercise for about 5 minutes, gradually increasing the range of motion as tolerated.



Inferior capsule stretches

- **Overhead Stretch** - Hold a long club, broomstick, or similar object with both hands, hands shoulder-width apart. Keep your elbows slightly bent and your posture upright. Slowly raise your arms above your head as far as comfortable. Hold the stretch for 30 seconds and increase the range of motion as tolerated.
- **Table slides** - Start with your arm at waist height on a countertop or table. Begin to slowly slide your arm forward extending to a point of maximal tightness. Hold this position for 30 seconds then stretch a bit more and hold for 10 seconds.
- **Wall Crawls** - Place your arm straight in front of you against the wall. Slowly use your fingers to raise your arm up the wall. When you reach the point of maximal tightness, hold for 30 seconds. After 30 seconds, stretch a bit more and hold for 10 seconds. Then slowly lower the arm back down with assistance.



Posterior capsule stretches

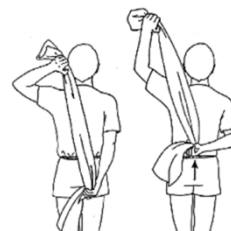
- **Cross-Body Stretch** - Stand or sit up straight. Bring your affected arm across your body, using your non-affected arm to gently pull it closer to your chest. Hold the stretch for 30 seconds.





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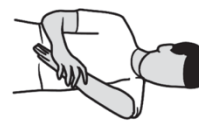
- **Towel Stretch** - Hold a small towel with both hands behind your back. Use your non-affected arm to pull the towel upward while allowing your affected arm to move upward along your back. Gently pull the towel higher up your back, stretching the shoulder. Hold the stretch for 30 seconds.
- **Sleeper Stretch** – Start by lying on a bed/table on your side with your painful side down and place a towel or pillow under your head for support. Bend your bottom elbow to 90 degrees and place it perpendicular to your body. Then use your other hand to press down on the back of your forearm towards the bed/table to increase the stretch. The goal is to get your arm all the way down parallel to your body. Hold the stretch for 30 seconds, stretch a bit farther for 10 seconds then relax.



Sleeper position



Start



Finish

Anterior Capsule Stretches

- **External Rotation Wall Stretch** - Find a sturdy stationary object such as a wall corner or a door frame at chest level. Stand facing the object with your feet shoulder-width apart. Extend your affected arm straight out in front of you, parallel to the floor, with your palm facing down. Bend your elbow at a 90-degree angle, keeping your upper arm close to your side. Your forearm should be pointing towards the object. Place the front of your hand and forearm against the stationary object. Gently lean forward, allowing your body weight to create a stretching sensation in the front of your shoulder and chest. Keep your back straight and maintain a slight forward lean, avoiding excessive arching of the back. Hold the stretch for 30 seconds.
- **External Rotation Cane Stretch** - Use a cane, golf club, or broom and place your hands shoulder width apart. Make sure your elbow stays tucked to your side. With the elbow bent to 90 degrees gently force your painful arm to the outside of your body using the stick in your non-painful arm applying the force. Hold for 30 seconds and then relax.



Start



Finish

