2. FROZEN SHOULDER

What is frozen shoulder?

A shoulder becomes frozen when the soft tissues around the joint become tight and short. This prevents the shoulder from moving and leads to the pain and stiffness with which you are familiar.

The problem may resolve over time but it can take up to few years or sometimes even 10 years.

Manipulation under Anaesthetic (MUA) OR arthroscopic release

What does MUA mean?

This technique is used in the treatment of frozen shoulders. The aim of the manipulation is to reduce the recovery time by stretching the joint to gain full range of movement and injecting local anaesthetic and steroid to reduce inflammation and pain.

If the shouder is very stiff even after a MUA an arthroscopic release of the tight capsule may be necessary

What happens after?

You will usually only be in hospital for a day. A doctor/physiotherapist will see you before you go home. You will be given exercises to do immediately after the procedure. These exercises are an essential part of your recovery.

Outpatient physiotherapy should be arranged for the day after your procedure. This should be organised before you are admitted to hospital.

You can return to work as soon as you feel able and driving is usually possible after one week but may take upto 3-6 weeks.

It is essential that you attend regular physiotherapy in the first few weeks following your procedure. Please ensure that your employers are aware of this commitment.

What are the complications?

As with all surgery there is a risk of some complications. These are rare, but you should be aware of them before your operation. They include:

Complications relating to the anaesthetic.

Injury to the nerves around the shoulder.

Failure of the operation in improving pain or movement in your shoulder. There should be about 75% improvement in symptoms in the first four to six weeks.

The upper arm bone (humerus/ glenoid) breaking. This is extremely rare.

If you require further information please discuss with the doctors either in clinic or on admission.

Guidelines for patients following manipulation under anaesthetic.

Introduction

This technique is used in the treatment of frozen shoulders. A shoulder becomes frozen when the soft tissues around the joint become tight and short. This prevents the shoulder from moving and leads to the pain and stiffness with which you are familiar.

General guidelines

Pain:

A nerve block is sometimes used during the procedure, which means that immediately after the operation the shoulder and arm may feel numb. This may last a few hours. The shoulder will be sore when this wears off and this may last for the first few weeks. It is important that you continue to take the painkillers prescribed in hospital. Ice packs may also help reduce pain.(ask physiotherapists).

Movement:

It is of the utmost importance that you begin moving and exercising the arm on the day of the procedure. Adequate pain relief will enable you to perform the exercises demonstrated by the physiotherapist. Try to use the arm for normal daytime activities where possible

Driving:

You may drive after one/two weeks (3-6 weeks).

Returning to work:

If you have a desk job you will probably be able to return after one week. You may need slightly longer if your job involves lifting or manual work.

Leisure activities:

These will depend on the range of movement and strength in your shoulder. It is possible to do most things as long as your shoulder feels comfortable. Please discuss specific activities with your physiotherapist.

Follow up appointments:

You will have a follow up appointment at the hospital with Mr Venkat about three weeks following your procedure. You will be reviewed by the surgeon/specialist physiotherapist who will check your progress.

Progress:

This is variable. In the first few weeks your shoulder will be sore although your movements will have improved. Do not be surprised if the soreness affects your daily activities. You should continue to move and use your arm normally. Over the weeks following your surgery you will notice a gradual improvement in movement and pain. It takes 6 – 9 months for good recovery.

Exercises:

It is essential that you carry out the exercises regularly following your procedure, ideally four to five times per day increasing as able. It is quite normal for you to experience aching, discomfort and stretching when doing the exercises but decrease the exercises if you experience intense or lasting pain.