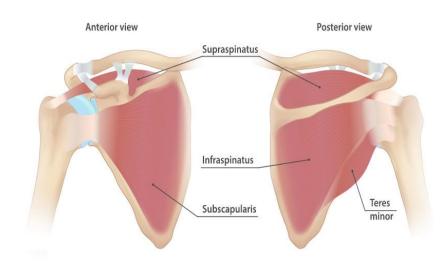




Rotator Cuff Related Shoulder Pain





(https://www.injurymap.com/free-human-anatomy-illustrations)

The normal shoulder and rotator cuff:

The shoulder is one of the most mobile joints in the body, capable of producing movement in many directions. It is a complex system made up of the humerus (the upper arm bone), the scapula (the shoulder blade), and the clavicle (the collar bone). On the top of the shoulder sits a bony protrusion called the acromion. The space below this is called the subacromial space. This is filled by the subacromial bursa, a fluid filled sac that acts as a protective layer between the bones and soft tissue structures. Because of the substantial flexibility, the shoulder relies on the soft tissues, especially muscles to keep it working well. There are numerous muscles around the shoulder that are important for function. The rotator cuff muscles are a group of 4 muscles that are important for both stability and producing movement at the shoulder. The muscles have strong tendons that attach them into the bone at the top of the arm.

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What is rotator cuff related shoulder pain (RCRSP)?

RCRSP is the most common form of shoulder pain in the adult population. It has previously been referred to by other names including shoulder impingement, or rotator cuff tendinopathy. The rotator cuff muscles work hard to provide stability and movement at the shoulder, and it is common to get some issues with these muscles over time. These can include small tears and irritation of the muscles, tendons or bursa. This can be due to overuse (especially with repetitive overhead work), relative weakness of the muscles in the shoulder, or sometimes after minor trauma. Often there is no apparent cause for the pain, and it may come on suddenly or gradually.

What are the symptoms of rotator cuff related shoulder pain?

Symptoms vary from person to person but may include;

- Pain in the shoulder and upper arm. This may radiate down the arm. It can present as either an ache or a sharp pain, or a combination of the two.
- Pain on activities such as lifting, rotational movements of the arm or driving.
- Pain when lying on the shoulder.
- Pain may be worse at night time and can affect your sleep.
- There may be some mild weakness of the shoulder muscles making it harder to lift your arm

Pain often occurs on certain movements but can also be present at rest. Movement of the shoulder can become reduced due to pain, and you may find it difficult to continue your normal activities due to the severity of the pain.

How is rotator cuff related shoulder pain diagnosed?

Rotator cuff related shoulder pain can be diagnosed after taking a history and undertaking a physical examination of your shoulder.

Do I need any investigations?

Investigations are rarely needed for shoulder pain unless there has been a traumatic incident. In many shoulders, imaging can show structural changes such as tendon thickening or tears. However, these changes are just as common in people with no shoulder pain. This means that what is seen on investigations is often not the cause of the problem, and in most cases the findings cannot tell you where the pain is coming from.

How long will the pain last?

This will depend on the severity of your symptoms, and it commonly takes a few months to improve. Your shoulder should start to feel better within 6 to 12 weeks of following the advice and exercises in this leaflet. However, for some it may take up to 6 months to see significant improvements.

What can I do to help myself?

Be positive! There are many things you can do yourself to help manage your symptoms. It is important to **keep moving your shoulder** within comfortable limits. This will stop your shoulder becoming stiff and keep the muscles strong. Gentle movement may also help to ease the pain.

Aim to keep physically active. General exercise will help your recovery so try to keep going with other activities that you enjoy to keep fit. If you don't already exercise regularly, try to build something in -a 20 minute walk every other day for example.

Try and use your arm normally. You should continue with work and leisure activities where possible. However, you may need to **modify or avoid activities** that cause a significant increase in your pain such as overhead activities or prolonged repetitive activity. Talk to your employer, if needed, to see if adjustments can be made for you to continue at work.

Pacing your activities can be helpful to avoid aggravating your pain. Use the **'traffic light system'** to plan and prioritise your activities through the week

Red activities are activities that always cause pain

Amber activities can cause pain on a bad day or if you do them repetitively

Green activities are easy to do and cause little or no problems

'Red' activities can sometimes be broken down into smaller tasks to make them 'amber' or 'green' activities. Consider spreading activities out during the week to avoid too many red activities in one day.

Heat or cold can be used to help pain. Use frozen peas wrapped in a damp tea towel for up to 15 minutes, or alternatively try a wheat bag/hot water bottle wrapped in a towel. Use whatever gets best results for you. Make sure to protect your skin with a towel and regularly check your skin to avoid skin damage as both can cause burns if used incorrectly.

You may be prescribed simple **pain relief** or **anti-inflammatory medication**: take these as prescribed until the pain settles. Your GP or Pharmacist can advise you on this. Consult your GP if your medication is not helping as they may be able to prescribe an alternative medication. **Sleep on a supportive mattress** and avoid sleeping directly on the shoulder if this is painful. You may find it useful to **support your arm with pillows** to prevent yourself rolling on to your painful shoulder and aid better sleep. Try sleeping on your opposite side with a pillow tucked under your armpit. Choose whatever position is best for your pain levels.

You may find simple **relaxation methods** can also be useful to relieve your pain.

Shoulder exercises

These may help to reduce pain and increase function in your shoulder. You should start gently to avoid aggravating your pain. A small increase in pain while exercising is okay as long as it goes away within 30 minutes and is not worse the next day. If you do get an increase in pain, don't worry, do fewer repetitions the next time and then gradually build up again.

If you follow the instructions and exercises in this leaflet, there is an excellent chance you will improve your shoulder pain and not need any more treatment. If your shoulder does not start to improve within 12 weeks, or gets worse despite the exercises, you will need to visit your health professional again.

Even if you only see slight improvements, keep doing the exercises. Often it can take a few months to get a significant improvement in your pain and function.

Getting the most from your exercise

- Build the exercises into your daily routine so you can do them regularly.
- Find time when you are not under pressure and can give the exercises your full attention.
- Try to do the exercises between 4 and 5 times per week
- Your physiotherapist can highlight which exercises are the best for you to try.
- Start with 1 or 2 exercises and gradually build up to doing more.
- It helps to keep an exercise diary to record how many repetitions you have done and see how you are progressing.
- Your physiotherapist may recommend specific exercises for you that relate more specifically to your individual problems or will help you to do your job, hobbies or sporting activities without pain.

Exercises

Table slides

- Sit down resting your forearms on a folded towel on a table. Make sure the table is a comfortable height, you may need to use a cushion to raise yourself a little if it is too high. Slowly slide your hands forwards as far as feels comfortable, than bring them back to the start point.
- Repeat 5-8 times then rest for 1-2 minutes
- Repeat 5-8 times more if able

Wall Slides

- Find a smooth wall or wall mirror and a cloth that will slide easily on the wall. Stand facing the wall. Place the edges of your hands against the wall with your thumbs facing you.
- Now step forward as you gently push into the wall and slide your hands up as far as you can. Relax and return to start position.
- Repeat 5-8 times then rest for 1-2 minutes
- Repeat 5-8 times more if able
- When you can do this exercise easily you can progress to sliding just your affected arm
- The following video is a useful guide to this exercise;
 <u>Exercises for Shoulder Pain: Wall</u> <u>Slides - YouTube</u>

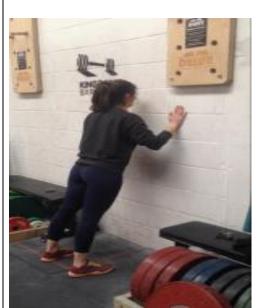


Push-ups against the wall

- Now put your hands on the wall as if you are going to do a push-up. Make sure your hands are placed a little wider than the width of your shoulders, your hands are turned out slightly and your elbows are below your shoulders.
- Now lower your body towards the wall keeping your body nice and tall.
- Repeat 8-12 times then rest for 1-2 minutes
- Repeat 8-12 times more if able
- When you can do this exercise easily you can progress and increase load by moving your feet further from the wall.
- The following video is a useful guide to this exercise;
 <u>Exercises for Shoulder Pain: Push-</u> ups against a wall - YouTube

Rotator cuff strengthening

- Sit next to a table with your elbow resting on a table. Use a folded towel or cushion if needed to get the arm to a comfortable height. Now, keeping your elbow bent, rotate your forearm slowly to point upwards.
- Return to the start position and relax.
- Repeat 8-12 times then rest for 1-2 minutes
- Repeat 8-12 times more if able
- When you can do this exercise easily you can progress by adding a small weight such as a dumbbell or bottle of water. Increase the weight you use as you progress.
- The following video is a useful guide to this exercise;
 <u>Exercises for Shoulder Pain:</u> <u>Shoulder Rotation - YouTube</u>





Managing flare ups of pain

It is quite common for shoulder pain to settle and then flare up at times. This doesn't usually mean you have caused any damage to your shoulder (unless you have had trauma e.g., a fall). If this happens there are a few steps, you can take to help;

- Have a short period of **relative rest.** Reduce your exercises/activity but keep your arm moving.
- **Review your medication** and increase for a few days if needed. Your GP or pharmacist will be able to help.
- Modify your sleep positions
- Gradually return to normal activities as the pain settles

Other treatments that may be considered

Physiotherapy is the main treatment shown to be effective for rotator cuff related shoulder pain. However, if you find that this is not successful, there may be other management options available to you. Your GP or physiotherapist can advise on which may be suitable for you.

- In some cases, a corticosteroid injection may be considered for pain relief. This is carried out by some GP's or an advanced practice physiotherapist.
- If you have significant ongoing pain despite physiotherapy and injection, you may be referred to an advanced practice physiotherapist or consultant orthopaedic surgeon for investigations or a surgical opinion.

Further Information

There are a series of 3 short educational videos that support the information in this leaflet;

https://www.youtube.com/playlist?list=PLTZVw1BV7Lo-IUItMOuZdQ9bYCQQ-LbUd

If you would like to seek the advice of a physiotherapist, there are a number of options within Wiltshire. Please speak to your GP practice about the ways you can be referred or visit <u>https://wiltshirehealthandcare.nhs.uk/physiotherapy/</u>

Useful websites:

https://www.shoulderdoc.co.uk/

This is a useful website for shoulder conditions containing advice and exercises.

https://bess.ac.uk/subacromial-pain/ Further information from the British Elbow and Shoulder Society

https://www.activewiltshire.org.uk/

Here you will find information on improving your activity level and details of what is available in your local area.

http://www.wiltshire.gov.uk/public-health-weight

Here you will find information about weight management options in your local area.

https://www.wiltshire.gov.uk/public-health-improvement-coaches

Health Improvement Coaches work on a one-to-one basis to support behaviour change and improve health. They concentrate on behaviours associated with ill health including unhealthy eating often linked to obesity, stopping, or reducing smoking, sensible drinking, increasing physical activity, building confidence and motivation to change and boosting self-esteem. They also signpost and support clients to access other services and activities where appropriate.

Safeguarding

Wiltshire Health and Care (WHC) are committed to safeguarding and promoting the welfare of children, young people, and adults at risk of abuse, including victims and survivors of domestic abuse. We expect all WHC staff to share this commitment and promote safeguarding by implementing WHC policies and procedures, act promptly on concerns and share information appropriately.

If you or your carer have any concerns regarding a child or adult's safety, please phone Wiltshire Safeguarding Team on 0300 456 0111 (Adult) or 0300 456 0108 (Child) (9am – 5pm Monday - Friday) or please call 999 if you feel they are in immediate danger.

Patient Advice and Liaison Service (PALS)

If you have any questions, or concerns, suggestions, or compliments about our service, please speak to a member of staff.

Patient and Public Involvement

We value your opinions which will help us to further develop our services. If you wish to provide feedback or get involved in our patient participation groups, please email the Patient and Public Involvement Officer at <u>ask.wiltshirehealthandcare@nhs.net</u> or telephone 01249 454386.