



Conservative Care for Stiff and Painful Shoulders

Options for conservative management of patients with stiff and painful shoulders have engendered considerable debate. Interventions including pharmacological management alone or in combination with corticosteroid injection, physical therapy, or “supervised neglect” have all been supported by anecdotal or statistical proof in the recent professional literature. How do these results impact decisions regarding “best practice” in caring for patients with stiff and painful shoulders? Unfortunately, no consensus exists based on current literature. However, our experience and data suggest that physical therapy should be a primary option for these patients.

Determining the functional outcome of patients using patient reported data has become an accepted and even expected component of the care provided for these patients. We currently utilize two tools, the American Shoulder and Elbow Surgeons Function Index (ASES) and the Single Assessment Numeric Evaluation (SANE), to assess patient reported function at the initial examination, at 2 to 4 week intervals during treatment, and at discharge. Both tools have been shown to be reliable and valid in assessing shoulder function based on current literature.

Over the past year, our patients with stiff and painful shoulders (n=33) reported significant functional limitations at initial examination on both the ASES (48.4/100) and SANE (44.7/100). These patients are typical of those described in the literature based on age (53.7 yrs), gender (70% female), duration of symptoms (7.1 months), and the presence of pain at rest (75%) and at night (91%).

Mean discharge ASES (79.3/100) and SANE (81.7/100) scores increased by 64% and 83% respectively in an average of 16 visits over 3-4 months. Four patients (14%) required surgical intervention. **We conclude from our findings that the percentage of functional improvement in patients with stiff and painful shoulders is substantial enough to warrant the use of physical therapy as a primary means of conservative management.**

Our treatment regimen of patient education, pain-free manual therapy, specific strengthening exercises, and a home exercise program of frequent but gentle repeated motions has resulted in

excellent outcomes. Please consider including Body One Physical Therapy in the management of your patients with stiff and painful shoulders.

References

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