

Exercises

There are two aspects to exercise. First there is stretching and second there is strengthening. The timing at which to start exercising is very important.

Phase 1 - freezing

This is a crucial time for starting a gentle stretching regime. Gentle is the operative word. Your shoulder is likely to be very inflamed at the beginning of this phase but gently stretching the capsule three times per day for five minutes stops the adhesions getting too tight. If you are in too much pain, do as much as you can or stop completely for a few days. Remember to use ice for pain relief.



Capsule stretching

This important exercise is best done gently in between each treatment session. Start with this passive exercise before you add any weights. It is very simple but easy to get wrong so please follow the instructions carefully.

- ★ Bend forward at the waist
- ★ Let the bad arm drop towards the floor under its own weight - feel the sense of tugging and traction in the shoulder joint
- ★ You can support your other hand on a chair
- ★ Move your body to make the hanging arm swing gently
- ★ Use this method to swing or rock the arm in small to medium-sized circles

You may want to use ice after these sessions.

Shoulder shrugging can be performed five times daily for 2 -5 minutes. You can move both shoulders at the same time and then independently. Raise the shoulder up to the neck and push them downwards towards the floor. Be careful if you have a neck problem. You can then gently rotate the shoulders in circles together then independently, again, take it nice and slow if you have any neck problems.

Shoulder shrugging

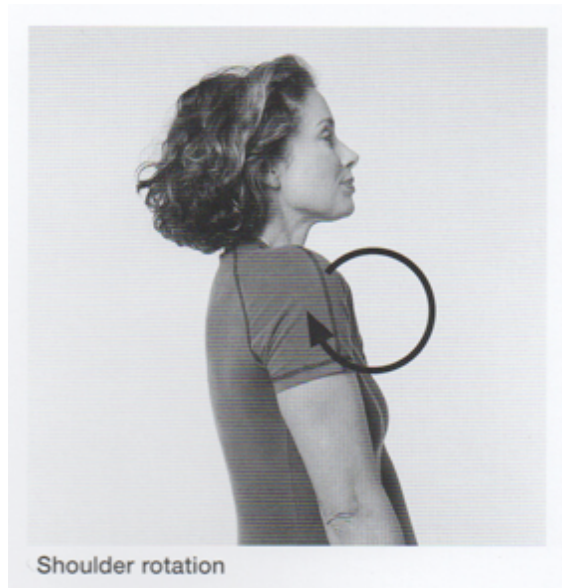
- ★ Stand upright
- ★ Shrug your shoulders upwards as high as you can for 8 seconds
- ★ Let the shoulders drop
- ★ Squeeze the shoulders downwards
- ★ Repeat 3 times



Shoulder rotation

- ★ Stand upright
- ★ Keep the hands by the sides
- ★ Rotate the shoulder in a circle
- ★ Change direction
- ★ Repeat on other arm
- ★ Repeat slowly for 2 minutes

You will know you are approaching the end of the first phase when your night pain reduces significantly. This indicates that there is less inflammation and less 'internal' burning inflammation. Now is the time to start 'stepping-up' your exercise programme by adding slightly deeper stretches of the capsule and weights where indicated.



Phase 2 - Frozen

Keep going with the phase I exercises.

You can now use a small weight to improve your capsular stretch and add some strength to the shoulder muscles.

You can also add the following exercises:

Crawl the wall

Part 1

- ★ Turn sideways to the wall
- ★ Using the load arm, gently crawl the fingers up the wall
- ★ Remember where you get to
- ★ Crawl back down the wall
- ★ Repeat several times



Part 2

- ★ Turn to face the wall and repeat the exercise



Simple shoulder stretches

These are simple exercises that can be performed sitting at a dining table.

Front of shoulder

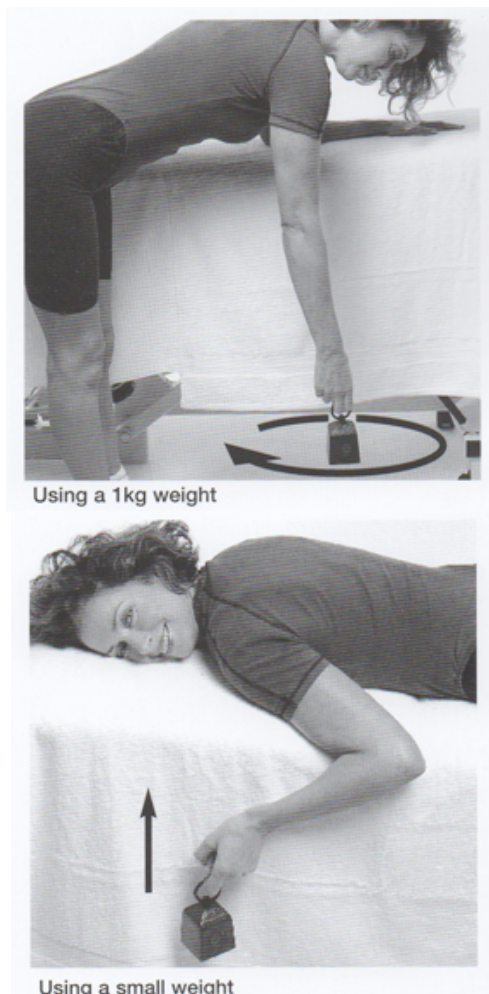
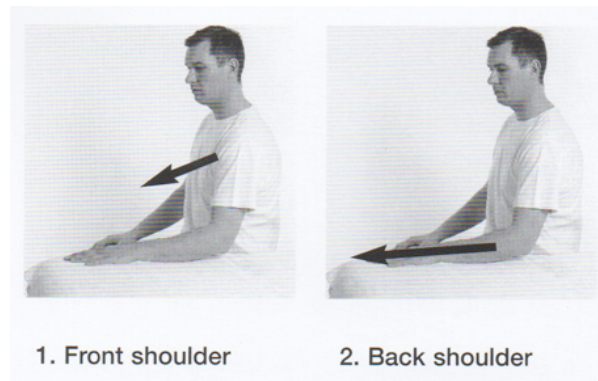
- ★ Sit square to a table and lean forwards on a bent elbow.

Stretching the back of the shoulder

- ★ Sitting at table crawl the hand forward and lean on it slightly until you feel a stretch at the back of the shoulder joint.

Traction and stretch

Sit on a table or plinth near to the edge
Hold the table edge with the hand
Gently lean away from the table edge
You should feel a stretching in the shoulder and neck



Phase 3 - thawing

After a few weeks of performing the Niel-Asher technique and with the above stretches you should feel ready to strengthen your weak shoulder muscles.

Remember they haven't been used properly for months, so take it gently. In my experience, 60% of people re-develop their muscle power just by going back to the normal every day activities. This is preferable. 40% of cases, however, really seem to need a bit of extra help. I have found adding the following exercises (to those already mentioned) useful in such circumstances

Strengthening

The following exercises involve either a using a small 1kg weight or using an elasticated resistance band.

These should only be performed when the night pain has diminished more than 90%.

Stretching using a 1kg weight

Lie on front using a small weight

- ★ Lift the weight up and down slowly in a controlled manner. Then let it hang to the floor to pull on the shoulder joint.
- ★ Swing the arm in circles slowly using the 1kg weight as in capsular stretching exercise.

Elastic resistance band

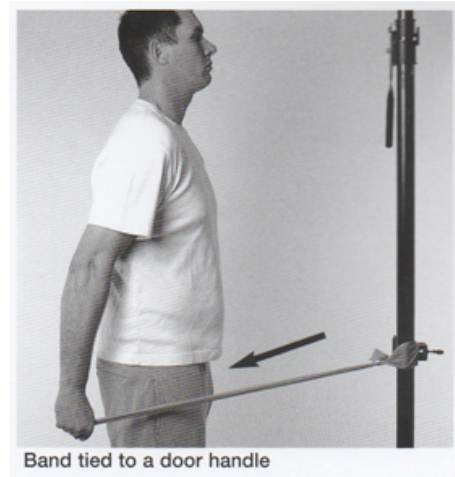
The way you hold the band is up to you but try varying your handhold every 3 days.

Using an elastic resistance band.

- ★ 1. Starting at waist level, slowly pull both sides of the resistance band
- ★ 2. Repeat halfway up the chest
- ★ 3. Repeat as high up as possible
- ★ Repeat 1-8 times
- ★ Be careful not to let it snap back
- ★ Be controlled both on pulling and on relaxing
- ★ You may want to build up to this
- ★ If in pain, stop.



- ★ Tie the band to a closed door handle
- ★ Facing the door pull the band backwards with a straight arm
- ★ Keep a slow and steady pressure



- ★ Perform this exercise by pulling the band apart behind the back
- ★ A towel may be used instead
- ★ Go slowly
- ★ Repeat 1-8 times
- ★ Change arms



Treatment reactions / side effects

We are used to going to the doctor and receiving a pill or remedy, which usually works within a few hours.

However it has been demonstrated that the majority of people (70%) have a reaction to treatment after an osteopathic session. Treatment reactions are a natural part of the overall effect of osteopathy.

This is because osteopathy taps into the body's own healing mechanisms and these often take a few days to adjust and re-balance. Curiously, from the research it seemed that the worse the treatment reaction the better the improvement seems to be, (JACAM April 1997, June 1997).

Some common treatment reactions/ side effects

Tiredness, headaches, changes in bowel movement (diarrhoea or constipation), increased urinary frequency, joint aching (flu-like) and/or increased pain for about 24-48 hours. All the above seem worse for neck pain.

Some people also feel emotional, vulnerable and/or tearful.

Drink plenty of water after treatment and rest when possible.

A treatment reaction commonly lasts for 2 -3 days.

If you feel worse after 2-3 days, please stop the treatment until the symptoms have settled. There has not been any documented cases getting worse overall from this treatment method. The only times people appear to feel worse is if they are in the freezing phase and their tissues are in exquisite pain / tenderness. Any treatment of tissues in this state will cause increased pain. If you are in this phase of the condition, it is advisable to let your symptoms settle for a few weeks and then try the method again.

Swimming

This is the best exercise for frozen shoulder.

It is only advised in the second and third phases, once the night pain has gone. Do not swim for more than an hour with regular breaks every other lap. Any stroke you can manage will suffice initially. As you get more confident you can experiment with the style. Expect the shoulder to ache initially; this will improve with time.

Remember your shoulder muscles will be very weak if you have not used them for many months. Do not overdo it, it is better to build things up slowly. Swimming has many benefits. Most of which are well documented. The main benefits for rehabilitating a frozen shoulder are that the body-weight is reduced and that the water offers just the right amount of resistance, when swimming to build up wasted muscles.

During the initial painful phase, rest may be useful as this gives inflamed tissue a chance to heal.

Rest, however, does not mean using a sling; this is only appropriate in rare cases, after a fracture or surgery.

Prolonged immobilisation has been demonstrated to aggravate the symptoms; in fact, it may even precipitate a frozen shoulder. Instead, try a combination of rest and some of the gentle exercises below. The use of non-steroidal anti-inflammatory medication (NSAIDs) has also proved useful in reducing tissue inflammation, because it inhibits the formation of various inflammatory substances. In some people this type of medication may cause stomach or skin problems, so please consult your doctor first. More gentle options include homeopathic arnica, ruta gravis and rhus tox. Some herbal medications have also proved effective in reducing inflammation. Rest is not so important in the frozen and thawing phases of a frozen shoulder (you have probably rested enough).

Sleeping position

Night pain and sleeplessness are possibly the worst aspects of having a frozen shoulder, especially in the early days. At first, you probably will not be able to tolerate pressure on your affected side. As your symptoms ease, however, you will find you can gradually ease into some type of position. The degree of night pain is directly proportionate to the amount of inflammation within the joint.

Some comfort, if not relief, can be obtained by:

- ★ Lying on your back with a pillow length ways under the affected arm(s) and shoulders, supporting them.
- ★ Lying on the good side with a pillow or towel over your waist and under the arm.

Ice

Ice can be particularly beneficial, especially in the acute first and second phases when the inflammation is most active. You may feel sceptical about this, but so many people have enthusiastically described the relief they felt from applying ice to their shoulders that it's certainly worth trying.

- ★ Wrap some crushed ice or frozen peas in a damp towel and place over the front of the shoulder joint.
- ★ Leave it there for five to ten minutes.
- ★ Let the area rest without ice for five to ten minutes and repeat.

You can also apply the ice to the back of the shoulder joint, the top, the side or other areas where there is acute pain. This is especially true in a posterior capsulitis. It is a good idea to ice the front of the shoulder even if it is not painful.

The ice regimen should be repeated as often as possible. When ice is not available or appropriate (at work, cinema etc) then cold sprays or gels can be useful - ask your pharmacist about them.

NB: never apply ice directly to the skin as it burns and leaves brown marks.

Heat

In the early stages of a frozen shoulder, the direct application of heat is not a good idea, though a warm bath can be helpful.

Warm packs / hot water bottles that are not too hot can be applied in the second and third phases.

If you have found that heat does give you relief, then an alternating cycle of ice/warm/ice can be tried.

Daily life

As mentioned above, the best position for the arm during the initial stages of the condition is to let the straightened arm hang loosely at your side, but that is not to say that you should let the frozen shoulder interfere too much with your daily life. In the face of constant pain, sleep deprivation and decreased joint mobility it is very hard to feel life is normal. This can also cause a sense of isolation.

'My shoulder really hurts' doesn't come close to describing the ordeal. It is very hard indeed for people to understand what you are going through. Such circumstances can lead to a sense of vulnerability and depression.

Some will expect more of you than you are able to give. Others 'leave you in peace' just when you would like some sympathy. Most people are not good at dealing with the pain of others, especially someone they love, so be patient with them.

Be sure to set out very clearly what can and can't be expected of you at work.

Re-positioning the shoulders

The following exercise may be useful in re-setting the shoulder posture. Ideally you should do it every day;

failing that, try to aim for every other day. It can be uncomfortable at first, but should not be unbearable.

If you cannot lie on the floor without severe pain then wait a week or so and then try again.

- ★ Place a duvet or thick towel on the floor and lie on it, face up.
- ★ Place pillows under both elbows and forearms.
- ★ Rest your hands on your stomach, palms down. If that's not possible just rest them on the pillows.
- ★ Stay in this position for 20 minutes. Listen to the radio if you like.

Very slowly the shortened tissues at the back of the shoulder should stretch. This allows the hands to drop towards the chest. The tight muscles at the front of the chest will also relax, allowing the shoulders to 'sink back'.

When acute spasm strikes A sudden movement, such as reaching for a falling cup holding a door that is suddenly blown open or even being bumped into on the street, can cause a sudden increase in painful muscle spasms. These acute attacks of severe pain can add anxiety to the sufferer's already considerable burden. Most patients find that they can stop these attacks by doing the exercise below. First this phenomenon needs to be understood.

The acute pain is caused when the thickened biceps tendon (long head) slips in its shallow specialised groove. This is because the biceps tendon sheath is thickened from inflammation. When an unexpected movement goes through the joint the muscles all lock into protective spasm. Going into the spasm by flexing the arm can reverse this sudden pain. The muscles no longer 'see' a need for their activity and it is switched off. However, there is quite a fine line between gently going with the muscles and creating a further 'challenge', so remember that the exercise described below is subtle and should be performed slowly and gently.

- ★ Rest the hand on a table or chair back with the palm down.
- ★ Allow the weight of the arm to rest on the hand, causing slight compression at the shoulder joint.
- ★ Breathe deeply and slowly. It helps to apply the pressure as you breathe out.
- ★ It is as though you were about to lean your body weight on your hand, while only applying a fraction of the force.

Posture

- ★ Try not to sleep with your arms above your head. This inhibits shoulder tissue repair, which occurs mainly at night.
- ★ Avoid carrying heavy bags or cases for long distances;
- ★ This has been demonstrated to precipitate tears in the supraspinatus muscle, a vital shoulder muscle.
- ★ If you work standing up all day, take regular breaks where you can sit and rest the arms on a chair; the weight of the arms hanging has been demonstrated to cut off the blood supply to major shoulder muscles.
- ★ If you are driving all day, or keeping your arms in a fixed position, take a regular break; this is because the muscles become fatigued and lactic acid builds up in the muscles, which over time can cause serious damage.
- ★ If you work in front of a computer typing, take regular breaks. This is a law in many countries because of eyestrain but the effect on the shoulders is as in the point above.
- ★ Be aware of your posture; the shoulder girdle operates best when the shoulders are held back and in correct alignment. 'Round shoulders' and long-term poor posture causes the shoulder muscles and joints to work inefficiently and can lead to 'pinching' of the issues as the arms are used, causing further damage.

One of the protective postures that people with frozen shoulder adopt is to hunch the affected shoulder forwards, bend the arm at the elbow, and cradle the arm to the body.

It is very important to avoid the sling position, which only compounds the problem. In this position the biceps muscle is contracted; stressing the tendon and eventually causing shortening. The best thing to do is straighten your arm and allow it to hang by the side of the body. Initially you should use the affected arm as little as possible, but as your pain diminishes you can swing the arm in walking.

Impediments to progress

Try to watch out for bad habits that contribute to the severity of your symptoms. These are often unconscious and include making repeated circular movements with the elbow, forcing the arm into an uncomfortable stretch, tensing the elbow against the side of the body, leaning your elbows on your desk, holding the arm in the sling position, not drinking enough water, carrying a heavy bag on one shoulder and tensing into the discomfort. When pain strikes, it is vital that you take a deep breath and let the muscles relax as you breath out.

The light at the end of the tunnel

Patients usually feel a good enough improvement' at the end of their first session to give them hope. However, the initial improvement is usually short-lived - from a few hours to a couple of days. You may also notice slight aggravation of your symptoms; these are the effects of the treatment itself. It is perfectly normal to feel a bit battered; so do not worry.

The benefits should last a little longer after each session however, no two patients are quite the same.

This treatment will accelerate you through the condition, not stop it in its tracks. If you are starting from the beginning of the first phase, you may get a bit less movement or a bit more pain initially. Sometimes the first movement in one particular direction is slow to respond, or that the night pain continues even if people are relatively pain-free during the day. Some regain lost movement quickly but still experience pain. Others are pain-free after only a short time, but continue to grapple with the disability of limited movement. There can also be a 'plateau' when little change seems occur. In my experience all patients will end up the same - with little to no pain and a functional if not full range of movement. Of those few patients who we have failed to cure completely, a good percentage report sufficient improvement to enable them to live more normal lives. Don't lose heart.