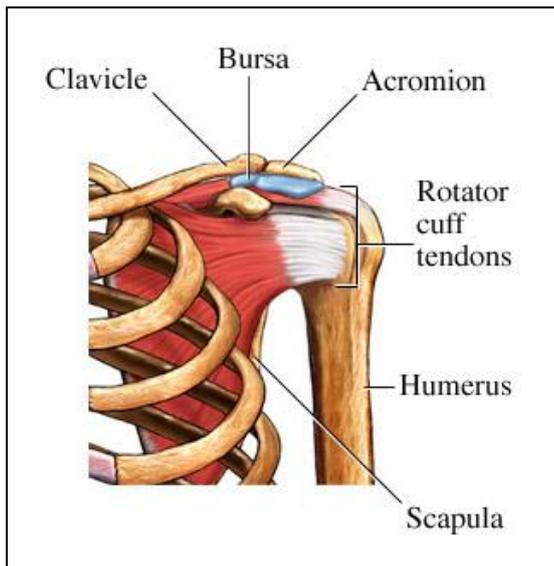


Shoulder Impingement Syndrome

The shoulder is made up of three bones: the scapula (shoulder blade), the humerus (upper arm bone), and the clavicle (collarbone). There are also a number of muscles, ligaments and tendons around the shoulder. Ligaments are fibres that link bones together at a joint. Tendons are fibres that attach muscle to bone.



A group of four muscles called the 'rotator cuff' are positioned around the shoulder joint and join into a large tendon (rotator cuff tendon). They are called supraspinatus, infraspinatus, subscapularis and teres minor and help to stabilise the shoulder joint and move the arm. The rotator cuff tendon passes through the subacromial space (the space underneath the acromion part of the scapula, or shoulder blade). A bursa is located above the rotator cuff tendon, which is a fluid filled sack to reduce friction between the humerus and the acromion.

What causes impingement syndrome?

With repeated movements above the head, throwing action or repetitive actions of the shoulder, the bursa and the rotator cuff can become pinched in the subacromial space and inflamed. Impingement syndrome can also occur because of long-standing wear and tear due to arthritis in the shoulder and bony spurs (protrusions) rubbing on the tendon. The pain that you experience is caused by this pinching or 'impingement'.

How is impingement syndrome diagnosed?

This is usually on the basis of your medical history and physical examination. Your doctor may order an x-ray or scan to confirm the diagnosis, rule out another diagnosis, or if they suspect a muscle tear.

What is the treatment for impingement syndrome?

It is important to **rest** from any activity that involves repetitive movement of the shoulder. This particularly includes overhead activity, which may mean you have to modify or change your work activities.

Be aware of your **posture** when sitting or standing. Try to gently bring your shoulder blades down and in towards the spine.

Ice may be helpful in reducing pain and inflammation. **Ice packs** may also help reduce pain. Wrap frozen peas / crushed ice in a damp, cold towel and place on the shoulder for up to 20 minutes.

When in bed placing a pillow behind the shoulder when lying on your back can sometimes help reduce the pain.

Exercises to maintain shoulder movement and strengthen the rotator cuff are attached. It is normal to experience aching or discomfort when doing the exercises but stop if you experience intense or lasting pain.

Painkillers as directed by your GP or pharmacist.

What is the prognosis for impingement syndrome?

There is evidence to support physiotherapy helping shoulder impingement. If the pain does not ease then a steroid injection in the shoulder may help. However some people with impingement syndrome need to have an operation to widen the subacromial space.