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Patient Information for Acute Shoulder Calcific Tendinopathy

Information for patients, relatives, and carers.

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What is Calcific Tendinopathy

Calcific tendinopathy is a condition that causes the formation of a small calcium deposit within the tendons of the rotator cuff. The level of pain can vary greatly, some people will have no pain and not know that they have calcium deposits, but for other people it can be a very painful condition. We do not know what causes it.

The pain can come on quite suddenly and be very intense. Three stages are described; formative, resting and resorptive phases. It is usually the resorptive phase which is the most painful, when the calcium is being broken down and reabsorbed by the body.

Calcific tendinopathy can happen to anyone and is not associated with any particular activity or trauma. People between the ages of 40 and 60 are affected more. Women are slightly more likely to be affected than men.

Calcific tendinopathy usually resolves by itself or with conservative management. There are treatment options for individuals with persistent symptoms.

Symptoms and Diagnosis

The main symptoms of acute calcific tendinopathy are a sudden onset of pain and reduced range of movement of the shoulder. Pain is often poorly localised and may be referred down the arm or into the neck. Night pain is also commonly reported.

An xray is needed to diagnose calcific tendinopathy.

Natural History

Calcific tendinopathy can be a painful condition, but it is not harmful or serious. In the majority of cases symptoms will settle without treatment between 1 and 6 weeks.

Self Help

- Relative rest and painkillers

If over the counter medication such as paracetamol and ibuprofen are not helping then your GP may be able to prescribe stronger pain medication.

Resting the arm for a few days can be helpful, but it is important not to let the shoulder stiffen up. If you have been provided with a shoulder sling, use it for comfort only and try to wean out of it as soon as possible. It is important to maintain good range of movement at the elbow, wrist and hand as well as the shoulder. There are some useful exercises at the end of this leaflet.

- Heat / Ice

Try using an ice or heat pack, wrapped in a tea towel, over the shoulder for up to 20 minutes at a time.

- Maintaining a healthy lifestyle

Maintaining and improving your overall wellbeing will help you to recover, for example maintain a healthy weight, being physically active, stopping smoking and reducing your alcohol intake.

Other Treatment Options

In many cases shoulder pain will get better on it’s own. If your symptoms are not settling then there are some treatment options available.

- Physiotherapy can be helpful to maintain your range of movement and shoulder strength.

- Steroid injections can help to control the pain.

- Ultrasound guided needling, or Barbotage, involves using a needle to break up the calcific deposit. Sometimes the calcification can be withdrawn into a syringe.

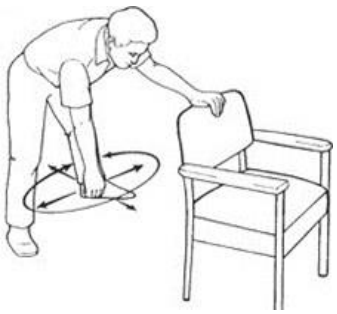
- Surgery is sometimes indicated if other non-operative treatments have failed to settle the pain.

Exercises

Try to keep your arm moving as your pain allows. This can help to prevent it getting weak and stiff. Try to get back to moving and using your arm normally as your pain eases. To begin with you should try these gentle exercises regularly throughout the day. Some mild discomfort is normal but stop if any of these exercises significantly increase your pain.

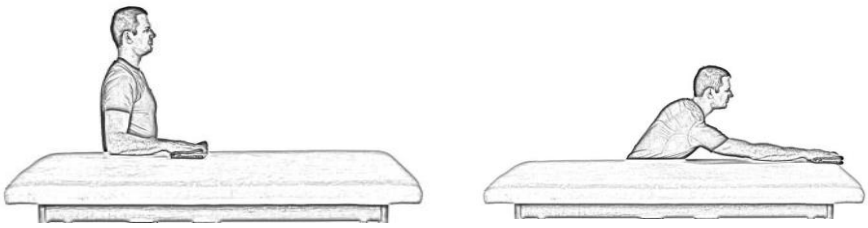
Exercise 1: Pendulum exercise

Lean forwards with your good arm supporting you on a table. Let your arm hang down and relax. Swing your arm forwards and backwards.



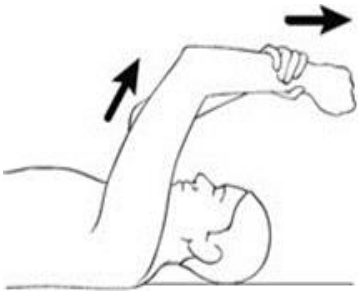
Exercise 2: Table Slides

Start sitting or standing with the arm/hand supported on a countertop or table. Slowly slide your arm out in front of you until you feel a stretch. Use a towel or similar to reduce friction.



Exercise 3: Assisted flexion

Lying on your back, support your operated arm with your other arm and lift it over your head. Try not to arch your back.

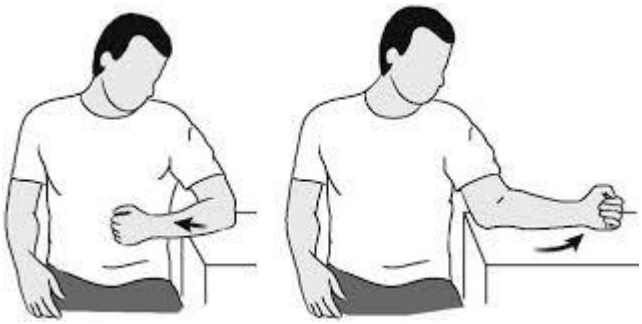


Exercise 4: Shoulder Rolls

Roll the shoulders forwards and backwards

Exercise 5: Shoulder Rotation

Support your elbow on a table, rotate your forearm away from your body then back again.



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Author: Laura Hedley, Advanced Physiotherapy Practitioner
Department: Orthopaedics / Physiotherapy
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