

Shoulder bursitis

What is it?

Bursitis refers to the inflammation of the soft, fluid filled, “lubricating cushions” around joints and tendons called known as bursas. Commonly affected in the shoulder is the Sub-acromial Bursa and Subdeltoid Bursa. These bursae allow the gliding of tendon and bone across each other during shoulder movements. These bursae can commonly become inflamed and irritated.

What are the symptoms?

There is usually pain felt in the shoulder on moving the arm up to the side or front. The pain can sometimes occur in an “arc of motion”, where pain may come on as you raise your arm, then as your arm reaches a certain point pain disappears. You may have an ache in the arm or shoulder after using it in overhead activities. Sometimes the shoulder can ache constantly, and sometimes be worse at night and towards the end of the day.

What are the causes?

Usually this can come about after a bout of increased arm use or after trauma or injury to the shoulder. Typically the load on the bursa is more than it is usually able to handle and it responds with an inflammatory reaction. There are also secondary factors that contribute to the overload on the bursa including shoulder and shoulder blade posture, balance of the muscle around the shoulder blade and position and set up of your work station or everyday activities.

What should I do?

Try to avoid the aggravating positions and activities until you see a Physiotherapist who will be able to determine the likely source of the pain. Resting will prevent the condition worsening however, it is important to not cease moving the shoulder all together. If your pain is severe, discussing pain medication and anti-inflammatories with your doctor is advised, as it may also be necessary to investigate with X-RAY or ultrasound imaging to discount serious pathology.

What shouldn't I do?

Ignore the problem. This can lead to the inflammation in the bursa continuing and can lead to unhelpful compensatory movements of the shoulder. If it turns out to not be bursitis, there is a likelihood of having damage to rotator cuff tendons that if ignored can lead to permanent damage.

Could there be any long term effects?

As mentioned above, permanent damage can be done with prolonged aggravation if there is other pathology that is not monitored. Tendons of the rotator cuff (stabilizing muscles around the ball and socket) especially can become worn, degenerated and tear. This can lead to permanent loss of strength or range and can sometimes lead to a need for surgical repair. Bursitis can last a long time if not managed correctly and can be quite disabling. This can sometimes prevent long term arm movement and lead to a “frozen” shoulder syndrome.

Physiotherapy treatment and management

Assessment of intrinsic and contributing factors is the most important aspect of management and treatment often focuses on re-learning less harmful movement patterns for the shoulder and shoulder blade to prevent the overloading and impingement from repeating. Treatment to correct any restricting biomechanical factors will be undertaken and appropriate exercise is an integral part of management. . Once all factors are accurately assessed and addressed, there is usually a very good prognosis for recovery.