

STERNOCLAVICULAR JOINT SEPARATION

What is a sternoclavicular joint separation?

The sternoclavicular joint is located where the collarbone (clavicle) attaches to the breastbone (sternum). These bones are held together by a piece of connective tissue called a ligament. A sternoclavicular separation occurs when the ligament tears.

How does it occur?

A sternoclavicular joint separation most commonly occurs when there is a direct blow to the sternum or a fall onto the shoulder or outstretched hands that causes a force along the length of the collarbone. It may occur in a contact sport when a player's shoulder hits the ground and another player lands on top of the other shoulder.

What are the symptoms?

There is pain, swelling, and tenderness over the sternoclavicular joint. There may be movement between the breastbone and the collarbone. Your collarbone may be displaced either in front of your breastbone or behind your breastbone.

How is it diagnosed?

Your healthcare provider will review your symptoms and examine your sternoclavicular joint. An X-ray or CT (computed tomography) scan may be ordered to see if there is a gap between your collarbone and breastbone.

How is it treated?

Treatment may include:

- putting ice packs on the injury for 20 to 30 minutes every 3 to 4 hours for 2 to 3 days or until the pain goes away
- taking anti-inflammatory medicine or pain medicines prescribed by your healthcare provider (adults aged 65 years and older should not take non-steroidal anti-inflammatory medicine for more than 7 days without their healthcare provider's approval)
- wearing a sling
- resting your shoulder and arm on the side of the separation until the pain goes away.

In cases where the collarbone is forced behind the breastbone, there may be a risk of

damage to the heart or the blood vessels in the chest and surgery may be required to repair the separation.

In some cases, the sternoclavicular joint heals but may have some instability, or movement, when you move your arm or shoulder. If this instability causes pain, your healthcare provider may recommend surgery.

When can I return to my sport or activity?

The goal of rehabilitation is to return you to your sport or activity as soon as is safely possible. If you return too soon you may worsen your injury, which could lead to permanent damage. Everyone recovers from injury at a different rate. Return to your sport or activity will be determined by how soon the injured area recovers, not by how many days or weeks it has been since your injury occurred.

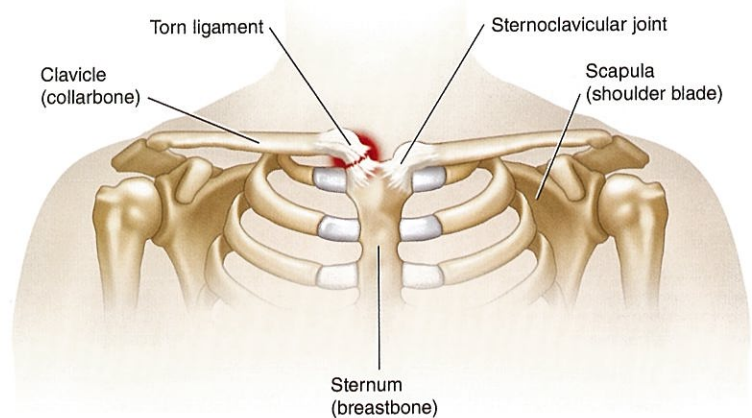
You may safely return to your sport or activity when:

- You no longer have pain at the sternoclavicular joint.
- You have full range of motion and strength of your shoulder.

How can I prevent a sternoclavicular joint separation?

A sternoclavicular joint separation is usually caused by an accident that cannot be prevented.

STERNOCLAVICULAR JOINT SEPARATION



STERNOCLAVICULAR JOINT SEPARATION REHABILITATION EXERCISES



1. CHEST STRETCH: Grasp your hands behind your back and lift your arms away from your body. Hold 15 to 30 seconds. Repeat 3 times.

CHEST STRETCH

2. SHOULDER FLEXION: Stand with your arms hanging down at your side. Keep your elbow straight and lift your arms up over your head as far as you can reach. Hold the end position for 5 seconds. Do 3 sets of 10.



SHOULDER FLEXION

3. SCAPTION: Stand with your arms at your sides and with your elbows straight. Slowly raise your arms to eye level. As you raise your arms, they should be spread apart so that they are only slightly in front of your body (at about a 30 degree angle to the front of your body). Point your thumbs toward the ceiling. Hold for 2 seconds and lower your arms slowly. Do 3 sets of 10. Hold a soup can or light weight when doing the exercise and increase the weight as the exercise gets easier. Your provider may instruct you to do this exercise with your thumbs down.



SCAPTION

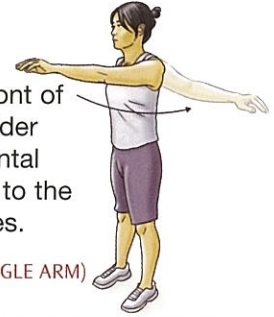
4. SINGLE-ARM SHOULDER ABDUCTION: Stand with your arms at your sides with your palms resting against your sides. With your elbow straight, lift one arm out to the side and toward the ceiling. Hold the position for 5 seconds. Repeat 10 times. Add a weight to your hand as this exercise becomes easier.



SINGLE-ARM SHOULDER ABDUCTION

5. SHOULDER HORIZONTAL ABDUCTION (SINGLE ARM):

Standing with your arm out in front of you, elbow straight and at shoulder level, move your arm in a horizontal direction out to the side. Return to the starting position. Repeat 10 times.



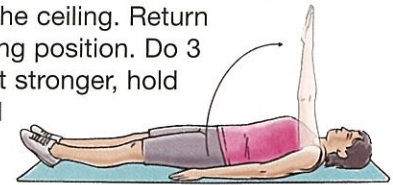
SHOULDER HORIZONTAL ABDUCTION (SINGLE ARM)



6. SCAPULAR SQUEEZE: While sitting or standing with your arms by your sides, squeeze your shoulder blades together and hold for 5 seconds. Do 3 sets of 10.

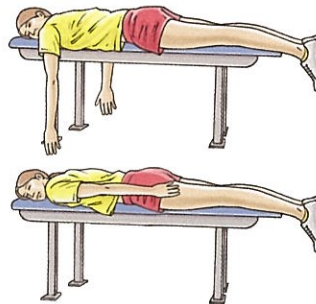
SCAPULAR SQUEEZE

7. SUPINE SHOULDER FLEXION: Lie on your back, hold your arm out straight, and move your arm up until your hand is toward the ceiling. Return your arm to the starting position. Do 3 sets of 10. As you get stronger, hold a weight in your hand as you do this exercise.



SUPINE SHOULDER FLEXION

8. PRONE SHOULDER EXTENSION: Lie on your stomach on a table or a bed with one arm hanging down over the edge. With your elbow straight, slowly lift your arm straight back and toward the ceiling. Return to the starting position. Do 3 sets of 10. As this becomes easier, hold a weight in your hand.



PRONE SHOULDER EXTENSION

9. HORIZONTAL ABDUCTION: Lie on a table or the edge of a bed face down with one arm hanging down straight to the floor. Raise your arm out to the side, with your thumbs pointed toward the ceiling until your arms are parallel to the floor. Hold for 2 seconds and then lower it slowly. Start this exercise with no weight. As you get stronger add a light weight or hold a soup can. Do 3 sets of 10.



HORIZONTAL ABDUCTION

CHEST/ABDOMEN