

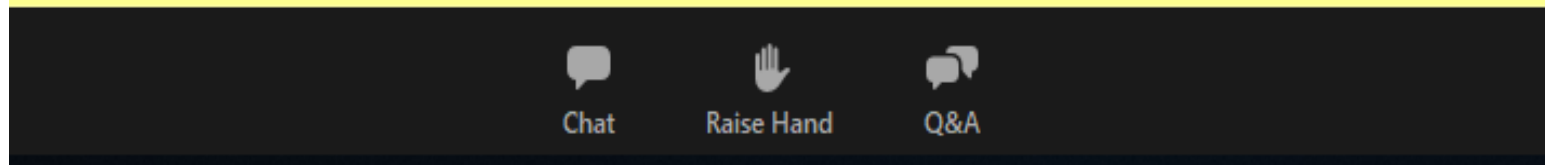
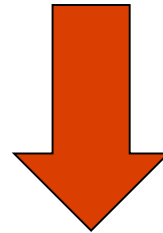


Working Together for Healthy Joints

Shoulder Arthritis

*This education is intended as general advice and is not meant to replace individual care from your health care provider

Questions?



Or email: oasis@vch.ca

Resource page

Shoulder OA Education Resources

(Open a resource by clicking on its title)

OASIS resources

- Webinar presentation: [Shoulder Osteoarthritis](#)
- Handouts:
 - [Osteoarthritis – Protecting your Shoulders](#)
 - [Shoulder Exercises](#)
 - [Over the Counter Pain Medications](#)
 - [Safe Use of Medical Cannabis](#)

Other resources

- [The Arthritis Society](#) – general arthritis information
 - [Shoulder Exercises videos](#) by The Arthritis Society

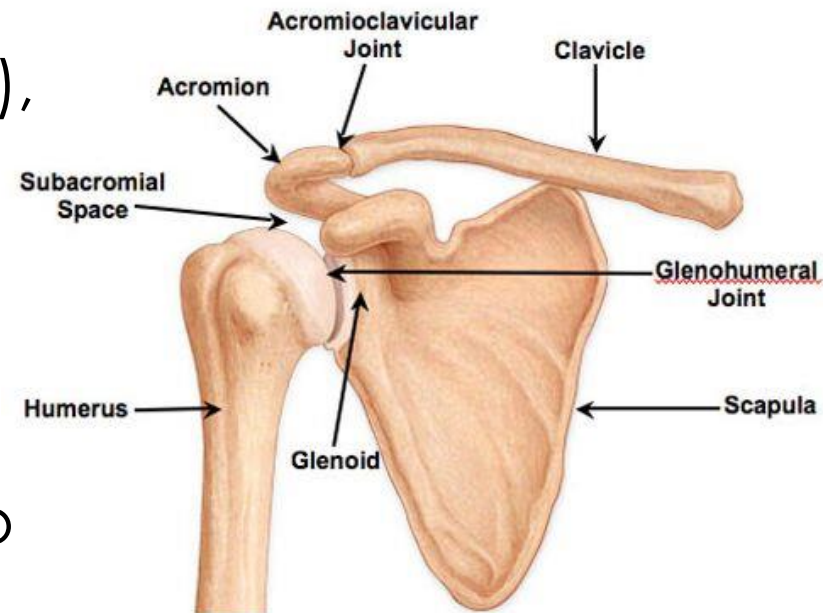
Today's Objective - Learn About :



- How the shoulder joint works
- Shoulder arthritis - causes, signs and symptoms
- Protecting your shoulder during daily activities
- Appropriate shoulder exercises
- Managing shoulder pain
- Other potential causes of shoulder pain

The Shoulder Joint

- Complex structure
- 3 bones – Upper arm (humerus), shoulder blade (scapula) and collarbone (clavicle)
- Most mobile joint in our body
- Relies on muscle interactions to provide stability



Bony anatomy of the shoulder

The Rotator Cuff (RC)

- Group of 4 muscles and tendons
- Form one broad band of tissue around the shoulder
- Stabilises shoulder ball in its socket and moves the joint
- Degenerates with age
- Often affected by arthritis



Image courtesy of the Orthopedic Associates of Michigan

What is Arthritis?

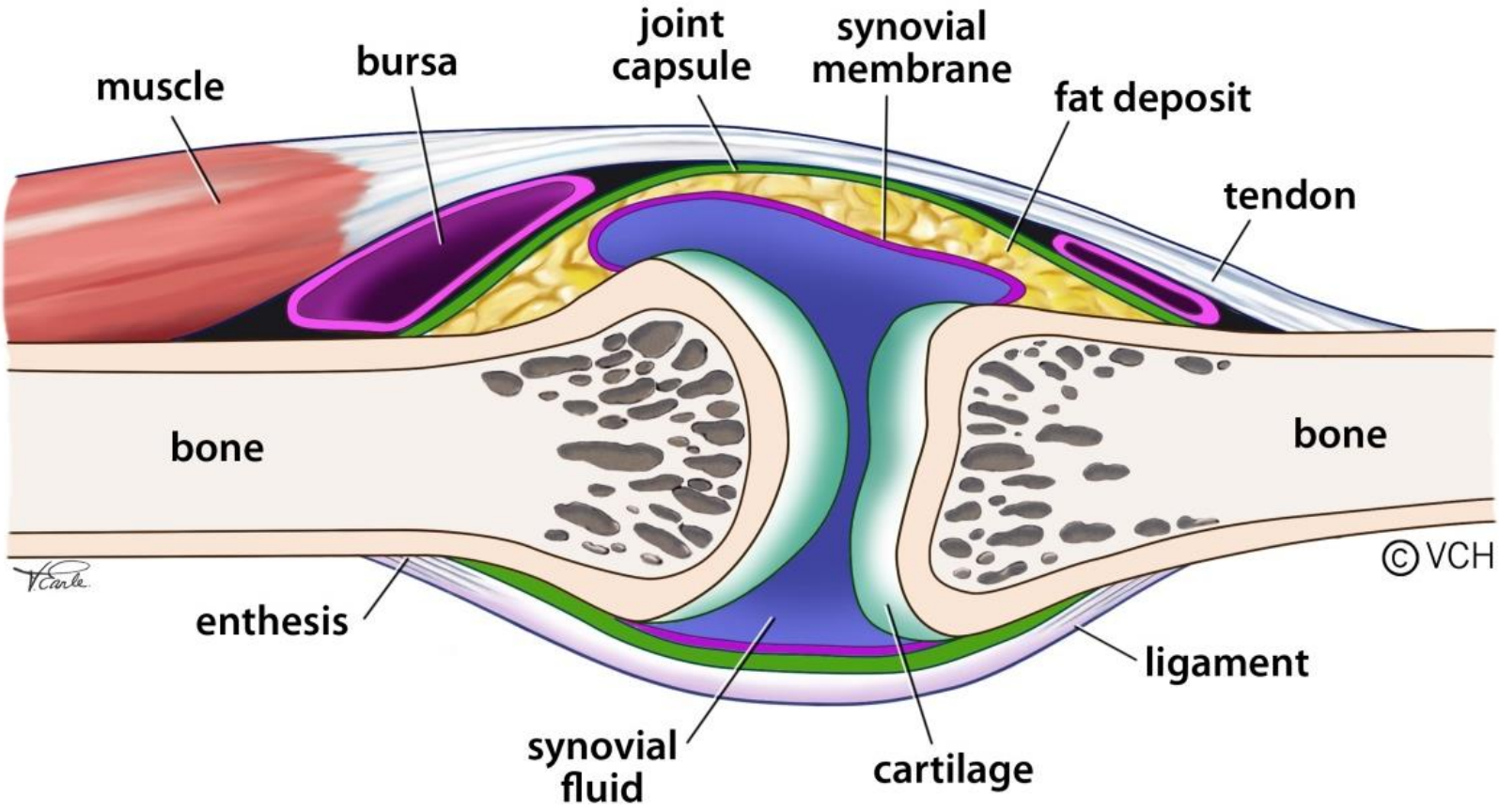
Degenerative

- Osteoarthritis (OA)
- 1 in 6 Canadians
- Loss of cartilage
- Can involve only 1 joint or more
- More common in women >60

Inflammatory Arthritis (IA)

- Rheumatoid arthritis, Psoriatic Arthritis, Lupus
- Autoimmune - the body's immune system affects healthy tissue in joints
- Multiple joints, may be symmetrical

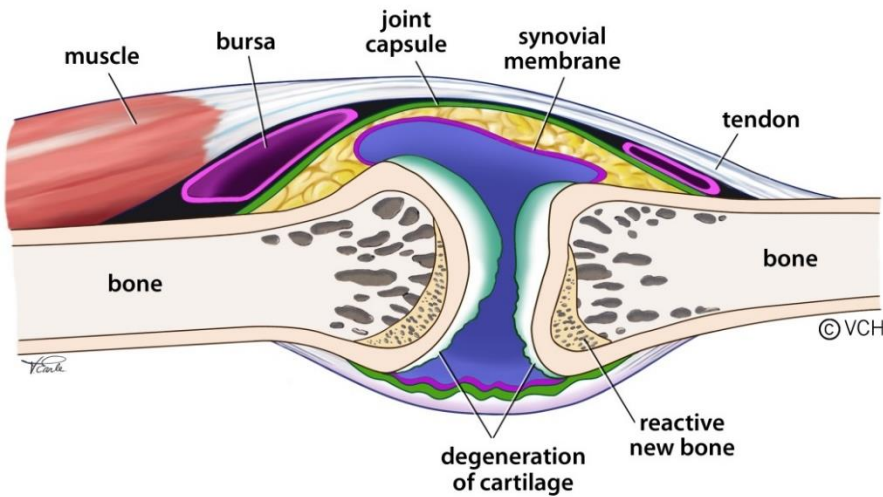
Normal Joint



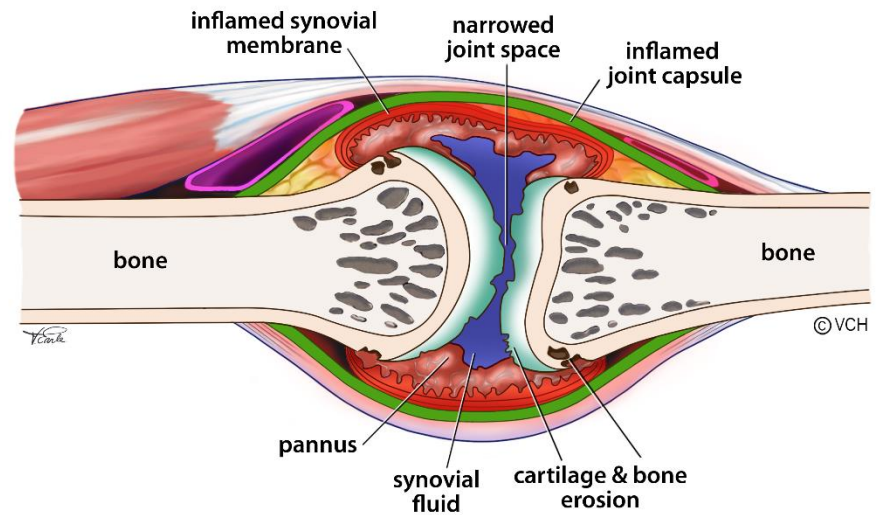
Osteoarthritis

Inflammatory Arthritis

Osteoarthritis - Early/Moderate



Rheumatoid Arthritis - Moderate



X-ray imaging

Shoulder Joint



Image courtesy of startradiology.com

Osteoarthritic Shoulder Joint

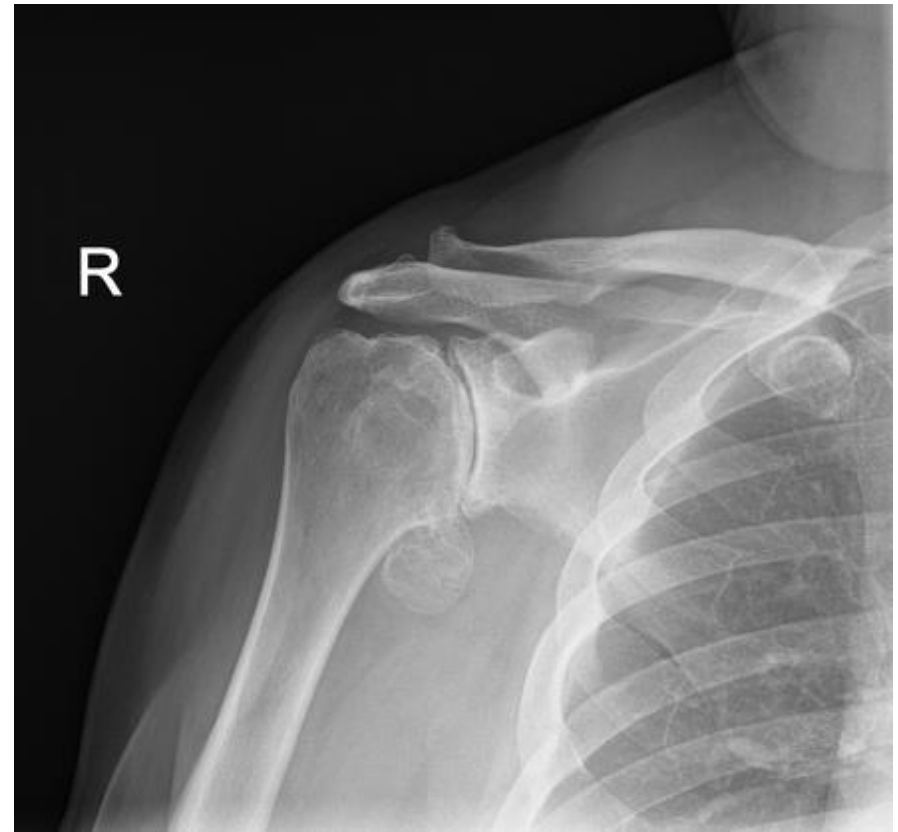


Image courtesy of radiopedia.org

Causes/Risk Factors

Osteoarthritis

- Previous injury/trauma
- Repetitive use or overuse
- Obesity
- Genetics
- Age/Sex

Inflammatory Arthritis

- Genetics
- Sex/age
- Obesity
- Smoking



Signs and Symptoms

- Pain (worse with increased use of arms, occasional at rest)
- Tenderness to touch
- Stiffness (worse in morning)
- Decreased movement
- Swelling +/- warmth
- “Grinding” sensation in later stages
- Weakness/fatigue with IA



Managing Shoulder Arthritis

- No cure for arthritis – self-management is key
- DMARDs/Biologics for IA
- Goals of management
 - Reduce pain
 - Reduce inflammation
 - Maintain mobility and function
 - Slow progression of joint damage



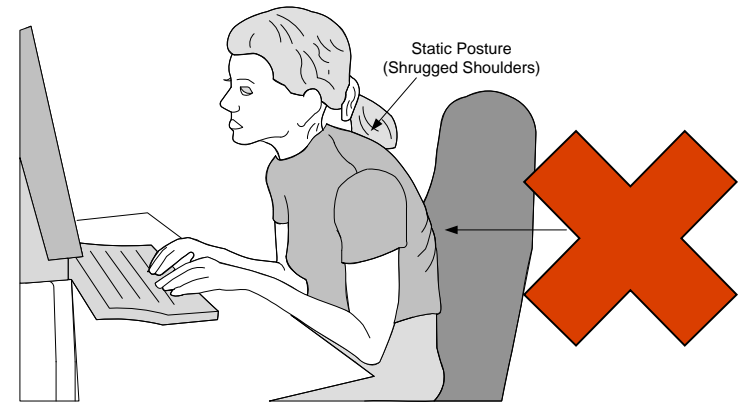
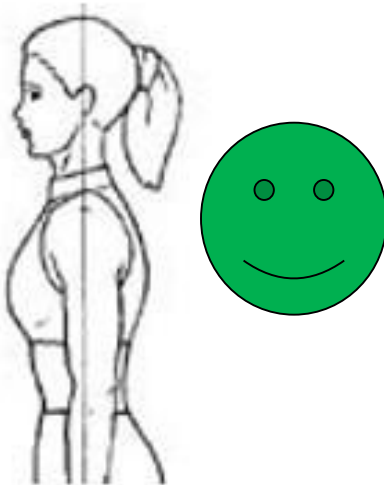
How we self-manage?

- Joint protection - activity modification
- Exercise/physiotherapy
- Pain management
- Nutrition
- Braces/supports
- Injections
- Surgery is a last resort



Joint Protection – Good Posture

- Relieves strain on neck and shoulder joints
- Maintains muscle length and strength
- Provides space and stability



Practicing Postural Awareness



- Shoulder blades back and down
- Chest lifting UP
- Chin tucked - ear over shoulder



Activities to Minimise:

- Repetitive or sustained arm activities
- Overhead activities
- Reaching/lifting with extended arm



Modifying Activities

- Take regular breaks, decrease duration
- Rest before have shoulder pain
- Use unaffected, or both arms for tasks
- Carry items close to your body
- Store items between hip and shoulder height
- Use a step stool to access higher items



Modifying Activities

→ Optimise desk set-up

- Ensure good sitting posture and ergonomics
- Use speaker phone or headset

→ Sit on higher surfaces (less arm use)

→ Choose lightweight cookware/tools

→ Consider other equipment that might help...



Helpful Equipment



Dressing

- Choose loose-fitting clothing
- Buttoned clothing is better
- Dress affected arm first, undress affected arm last
- Consider front-closure bras
- Consider a long-handled clothing hook



Resting/Sleeping Positions

- Support painful arm when upright
- Try hugging a cushion when sitting
- Sleep on back or on opposite side
- Use pillows to support painful shoulder
- Use an appropriate pillow for neck alignment
- Foam mattress topper



Take a Stretch Break!



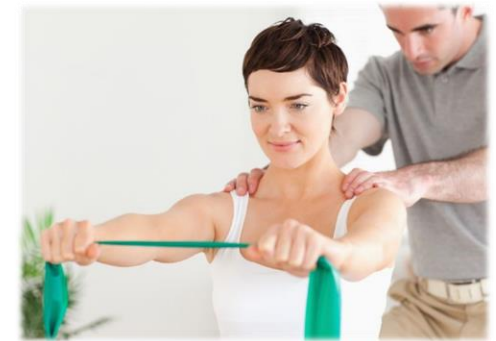
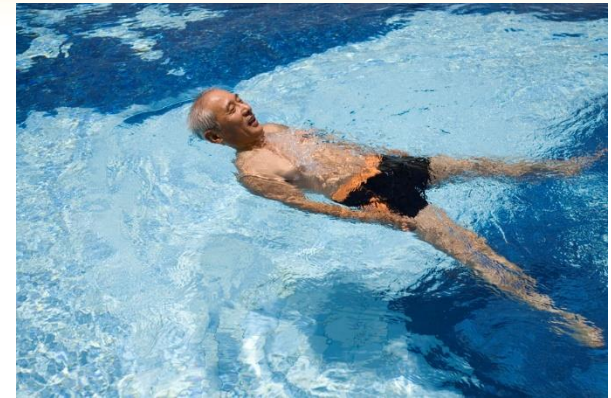
Exercise Goals

- Optimise general fitness and health
- Optimise shoulder mobility
- Maintain or improve shoulder strength
- Improve/optimize shoulder alignment and stability



Shoulder Exercises

- Start slowly/move gently
- Timing/medication
- Be consistent
- Be aware of posture while exercising
- Protect hands as needed
- Respect your pain
- Consult a physiotherapist



Scapular Stabilisation

→ Optimise shoulder stability



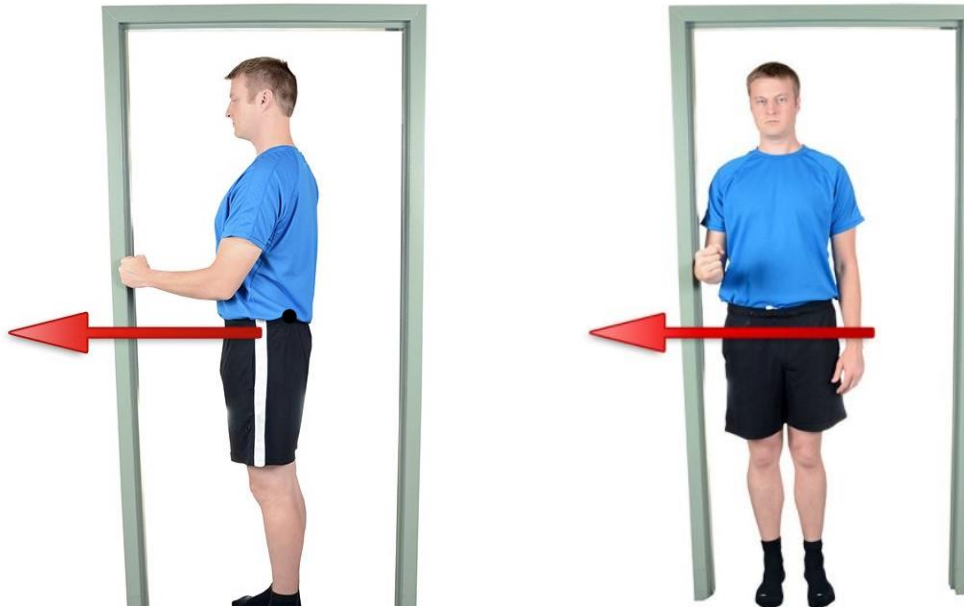
Range of movement/mobility

→ Slow joint movement through pain-free range



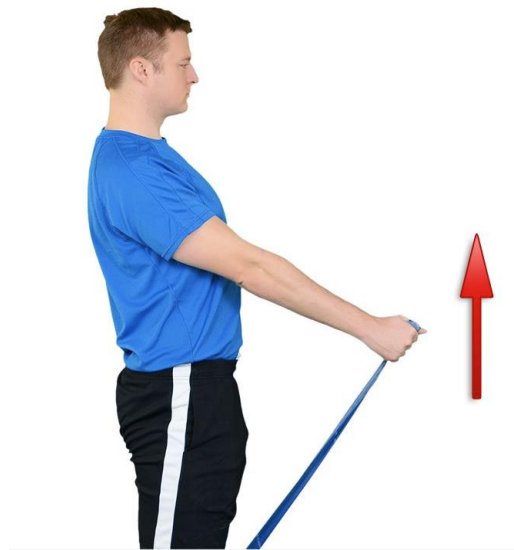
Strengthening - Isometric

- Contracting muscle without moving joint
- Helpful if movement is painful



Strengthening - Isotonic

- Contracting the muscle while moving the joint through range of movement
- Resistance with gravity/bands/weights



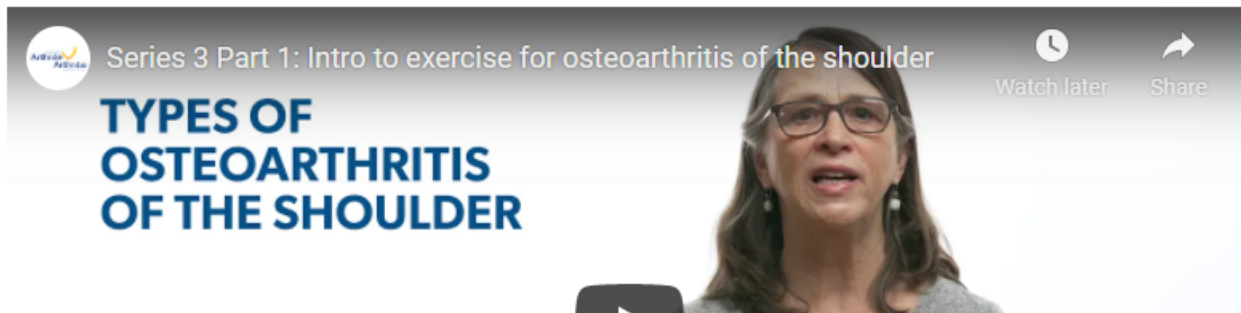


PHYSICAL ACTIVITY

Exercises for Osteoarthritis of the Shoulder

Part 1 : Introduction to Exercise for Osteoarthritis of the Shoulder

Exercise can be a helpful way to manage the symptoms of arthritis, but it is important to exercise caution when performing certain activities. Shoulder arthritis can be made worse by activities that include lifting heavy objects or raising the arms above the head. However, too much reduction in physical activity can be harmful, as it is important to maintain strength and range of motion in joints affected by arthritis. Regular exercise of the shoulder muscles can help reduce pain, promote healthy cartilage, and increase range of motion and function.



Shoulder Exercises

1. Posture

- Chest Bone UP
- Shoulder Blades BACK
- Ears over shoulders

Hold for at least 10s, many times a day. When walking, rotate your shoulders so that your thumbs point AWAY from your body for short periods of time.



2. Pendular Exercises

- Support your body weight on a table
- Let your arm hang towards the floor
- Rock your body back and forth to move your arm in circles
- Repeat as needed to decrease pain



3. Neck Stretch

- Reach to the floor, and on the other side, move your ear towards your shoulder
- Hold for 20 to 30s, repeat 2x each side
- If comfortable, you may rest your hand on your head to increase the stretch (picture)

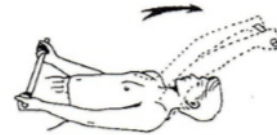


4. Shoulder Movement Exercises

- Lay on your back and use a dowel (broom, cane) for the movement. Adjust hand position for no pain. Repeat each movement 10x, for 3 to 4 minutes total (alternate exercises)

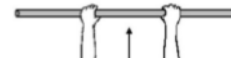
a. Shoulder Press:

- Press up towards the ceiling and back down



b. Shoulder Flexion:

- Bring arms up overhead, as far as comfortable. Slowly



Pain Management

→ Heat

- Decreases stiffness and tension
- Apply for 20 minutes per hour

→ Ice

- Reduces inflammation
- Protect skin - Apply for 15 minutes per hour

→ Medications (*consult doctor before use)

- Tylenol Arthritis, topical and oral NSAIDS
- Rheumatologist prescribed medications

→ Medical Cannabis

Braces/Supports – Why and Which?

→ May provide

- Stability and support
- Compression
- Facilitation of muscle activity

→ Consult an orthotist or physiotherapist



Bauerfeind **OmoTrain®**



Shoulder Injections



- Requires specialist referral by physician
- Corticosteroid – joint or tendon
 - Decreases inflammation
 - Short term effects
 - Repeat injections can cause damage to cartilage or tendon
 - Covered by MSP
- Viscosupplementation
 - Supplements synovial fluid to lubricate joint
 - Evidence does not support use for the shoulder yet
 - \$250-\$400 per shot

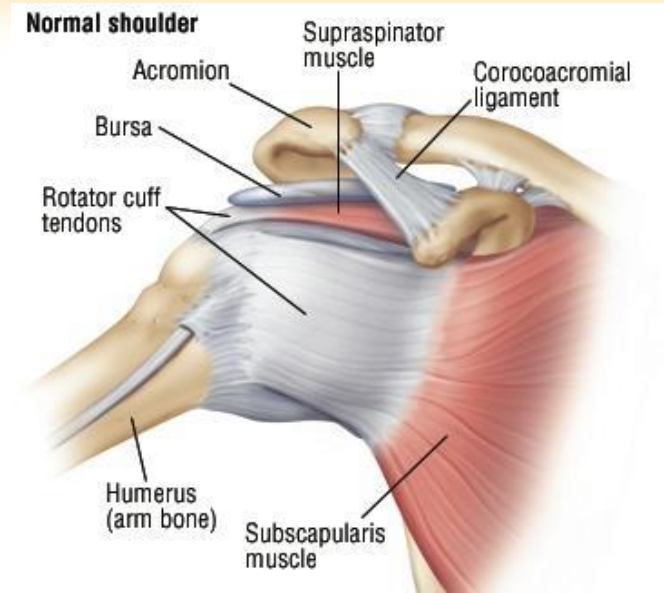
Surgery for Shoulder Arthritis

- Only considered after a trial of conservative management
- Severe arthritis, where pain is the main concern
- Consider physical demands post-op
- Partial/total joint replacement
- Long post-op rehabilitation
- Specialist surgical referral for consultation

Other causes of shoulder pain

Rotator Cuff Injuries

- Commonly affected with IA
- Impingement/Tendinitis
- Tears – tendinopathy, trauma
- Treatment: Range of movement exercises, appropriate strengthening exercises with physiotherapy, pain medications, injection, surgery if indicated for tear.



Frozen Shoulder (Adhesive Capsulitis)

- Thickening and tightening of joint capsule
- Commonly occurs between 40-60 years
- Pain and stiffness in stages
 - Freezing, frozen, thawing
- Can last 1-3 years
- Treatment: Consistent range of movement exercises, physiotherapy, pain medications, injection, manipulation/surgery is rare.

Neck Involvement in Shoulder Pain

- Neck and shoulder connected closely through soft tissues and muscles
- Poor posture can be a contributing factor
- Radiating pain – pain from neck felt in shoulder
- Consult a doctor/physiotherapist
- Consider alternative therapies
 - Massage, acupuncture, IMS, TENS



In summary...

- Shoulder arthritis can be managed well
- Make an Action plan!
- Joint protection is key
- Manage your pain
- Regular exercise is important
- Maintain a healthy body weight
- Check-in with physiotherapist or doctor





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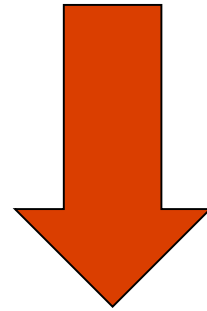
OASIS Education Sessions...



- Pain Management
- Ergonomics/Working from home
- Curious about Cannabis
- Ask Anything
- Exercise and Arthritis
- Hand Arthritis
- Nutrition & Supplements

oasis.vch.ca

Questions/Comments?



Chat



Raise Hand



Q&A

Or email us:

oasis@vch.ca

Thank you for you attending!