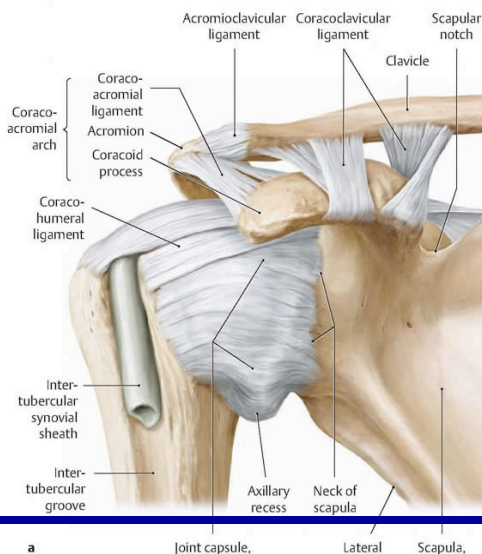
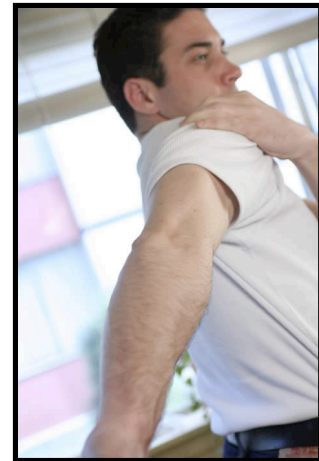


## Frozen Shoulder Syndrome: Symptoms and Treatment

- Frozen Shoulder Syndrome severely restricts movement of the shoulder and causes significant pain.
- The glenohumeral joint capsule becomes inflamed and adheres to itself and structures adjacent to it.
- Cases of Frozen Shoulder can last from 10 months to 3 years without effective treatment.
- Integrative Neurosomatic Therapy addresses shoulder dysfunction as part of overall postural distortion.
- Improper biomechanics, including gait patterns and muscular imbalance, contribute to inflammation that can lead to Frozen Shoulder.



- Integrative Neurosomatic Therapy quickly treats the joint capsule to eliminate adhesions and restores proper mechanics to prevent recurrence.

Also called adhesive capsulitis, frozen shoulder is a condition in

which the glenohumeral joint capsule, a normally soft and pliable structure, can become inflamed and stiff. Adjacent folds of the joint capsule grow together with abnormal bands of tissue that form adhesions. These adhesions can severely restrict the range of motion of the shoulder and cause a great deal of pain with movement.

Another key component is a lack of synovial fluid within the joint capsule. This fluid normally lubricates the joint and facilitates movement. Many patients with frozen shoulder have difficulty performing simple day-to-day tasks and often have difficulty sleeping due to pain. Raising the arm above the head and lateral rotation of the shoulder tend to be the most difficult movements as in reaching back for a seat-belt in a car. Adhesive capsulitis usually progresses in three stages; freezing, frozen and thawing. This entire process can last anywhere from about 10 months to more than 3 years according to the American Academy of Orthopedic Surgeons. It usually affects people between the ages of 40 and 60.

Conservative treatments for frozen shoulder generally consist of NSAIDs, physical therapy, massage therapy or acupuncture. More aggressive treatments include steroid injections, hydrodilation of the joint capsule and joint manipulation under anesthesia.

Little is understood about the mechanism that causes frozen shoulder. The thickening and adhesion of the capsule may be related to an auto-immune syndrome or inflammation arising from traumatic or repetitive use injury. What is clear is that an immobilized shoulder or one with an already decreased range of motion is more likely to develop adhesive capsulitis. The shoulder is normally an incredibly mobile joint providing a greater range of movements and a wider variety of movements than any other joint in the body. There are 18 muscles that directly affect movement of the shoulder girdle and they must work well together or the shoulder will become restricted. From an Integrative

Neurosomatic Therapy perspective, biomechanical dysfunction of the shoulder is often linked to biomechanical dysfunction elsewhere in the body. Gait patterns, the movements the body incorporated into walking, quickly reveal postural distortions in that can lead to chronic shoulder pain. In normal gait, the arms should swing freely from the shoulder in a straight forward and back, pendulum-like movement. Often, distortions of the pelvis such as obliquity or rotation cause the arms to swing across the body, irritating the structures of the glenohumeral joint. Chronic muscle imbalance is sure to follow this kind of change to the movement of the shoulder. A patient is left with a chronically inflamed and restricted shoulder, all of which can contribute to a frozen shoulder syndrome.

Key elements the Integrative Neurosomatic Therapy approach to treating adhesive capsulitis include determining the postural distortions that contributed to causing shoulder dysfunction, soft tissue release techniques aimed directly at restoring the flexibility of the shoulder and restoration of postural balance. We have found that recovery from a frozen shoulder can be greatly facilitated by applying these principals. Patients generally find that their pain levels are reduced, their range of motion is increased, allowing them to return to normal activity much faster.

Call Today to let one of our expert therapists answer any questions you may have regarding Frozen Shoulder Syndrome (727) 347-HEAL (4325) or email us at **[info@stjohn-clarkptc.com](mailto:info@stjohn-clarkptc.com)**.