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Case study

The frozen shoulder

Dr Frank Burke MBBS, FRANZCR

In 1989 at I-MED Radiology Victoria House, my colleague Mr Rodney Dalziel and I developed hydrodilatation as a treatment for adhesive capsulitis (frozen shoulder). Since then, we have treated more than 100,000 people for this enigmatic condition.

Most people who develop a frozen shoulder have no idea why they start to have increasing pain and stiffness in their shoulder. But from my talking with so many of these people, a pattern of common presenting features is clear. Please understand that this is the so-called "idiopathic" group, which makes up most of our patients, not those who suffer following an injury or surgery.

So often, someone will stretch their arm in a strange way to do something, like reach from the driver's seat to pick up an item from the back seat of the car. They feel a sort of tear or "something" but will at that stage be pain free. That night or the next day, a vague pain starts to develop in the deltoid area, laterally in the upper arm.

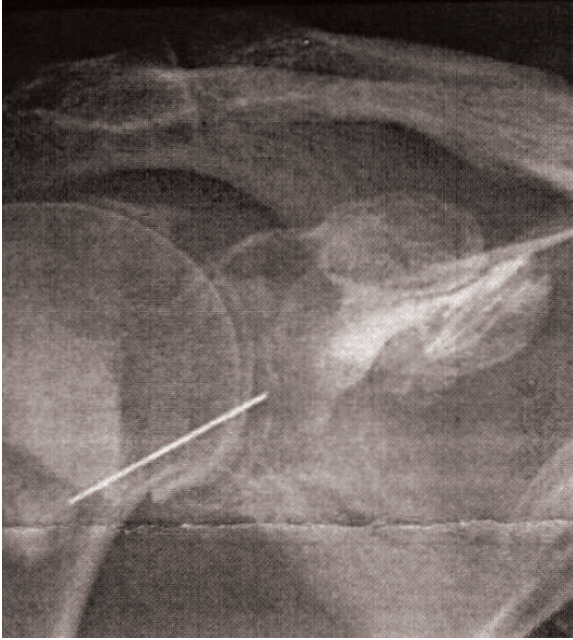
The usual pattern from here is one of hoping that this annoying pain will go away; in most cases it does not. The pain gradually increases and the afflicted person notices that their shoulder movements are becoming restricted.

It is this pattern of movement loss and pain that I want to emphasise. It is so typical of adhesive capsulitis that it should be readily diagnosed and treated early. Often our patients have presented to their practitioner who, for whatever reason, does not recognise the condition. At this stage, any x-rays taken will usually be normal. Adhesive capsulitis is a clinical diagnosis.

As a result, the pain and stiffness worsen to such a degree that some people barely get any sleep and have to try and sleep "sitting up".

So, what is this typical pattern of movement loss and pain?

Rather innocuously, pain develops in the lateral aspect of the upper arm (deltoid insertion). On certain movements, such as reaching up, the pain radiates down the arm towards the fingers and usually lasts about 30-40 seconds.



Shoulder hydrodilatation for adhesive capsulitis. The capsule is contracted around the humeral head.

At about the same time as the pain is increasing, other classical features commence. The patient is unable to sleep on the affected shoulder, which incidentally, in about 90% of cases, is their non-dominant shoulder.

External rotation, internal rotation and extension of the shoulder become increasingly reduced often to a stage where some people are hardly able to move their shoulder – it has “frozen”.

From a patient perspective, this may affect one’s personal hygiene (e.g. washing and dressing) and stop one from doing normal day to day duties. In ladies, the inability to do up their bra behind their back is a classic presentation.

Once a lady was referred to us after she went to buy a bra that clipped up at the front. To her credit, the saleswoman in the bra shop relinquished a sale and convinced the customer to obtain a referral to Victoria House to have a hydrodilatation. She did, and the treatment was a success.

In summary

If a person presents with no history of trauma or surgery but with an insidious onset of shoulder pain and restricted movement, as described above, think of adhesive capsulitis.

Hydrodilatation as a treatment is usually extremely effective and should be considered by the referring practitioner.

For treatment options please feel free to call Dr Frank Burke at I-MED Radiology Victoria House.



Dr Frank Burke
MBBS, FRANZCR

Dr Frank Burke is a Monash University graduate and diagnostic radiologist who specialises in musculoskeletal ultrasound. He is in private practice at I-MED Radiology's Victoria House Medical Imaging in Prahran and has over 20 years of experience in sports imaging and is considered an expert in his field.

Frank has lectured nationally and internationally on various topics, and was responsible (along with an orthopaedic colleague) for developing hydrodilataion, the treatment for frozen shoulder. Since then over 100,000 hydrodilataion procedures have been performed at Victoria House. Most Melbourne-based AFL football teams, Melbourne Storm, Melbourne Victory, Australian Tennis Open, Australian cricket team and all visiting international rugby teams use his services. He was Imaging Co-ordinator for the 2006 Commonwealth Games and an attending radiologist at the Sydney 2000 Olympics.



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