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## **Frozen Shoulder (Adhesive Capsulitis):**

Frozen shoulder, also called adhesive capsulitis, causes pain and stiffness in the shoulder. Over time, the shoulder becomes very hard to move. Frozen shoulder occurs in about 2% of the general population. It most commonly affects people between the ages of 40 and 60, and occurs in women more often than men. In frozen shoulder, the shoulder capsule thickens and becomes tight. Stiff bands of tissue called adhesions may develop. In many cases, there is less synovial fluid in the joint.

### **Symptoms:**

The hallmark sign of this condition is shoulder stiffness, often quite profound. It develops in three stages:

#### **Freezing**

In the "freezing" stage, you slowly have more and more pain. As the pain worsens, your shoulder loses range of motion. This painful stage may last weeks to months.

#### **Frozen**

Pain may actually improve during this stage, but the stiffness remains. During the 4 to 6 months of the "frozen" stage, daily activities may be very difficult.

#### **Thawing**

Shoulder motion slowly improves during the "thawing" stage. Complete return to normal or close to normal strength and motion typically takes from 6 months to 2 years.



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## Cause:

The causes of frozen shoulder are not fully understood. There is no clear connection to arm dominance or occupation. A few factors may put you more at risk for developing frozen shoulder.

--Diabetes. Frozen shoulder occurs much more often in people with diabetes, affecting 10% to 20% of these individuals. The reason for this is not known.

--Other diseases. Some additional medical problems associated with frozen shoulder include hypothyroidism, hyperthyroidism, Parkinson's disease, and cardiac disease.

--Immobilization. Frozen shoulder can develop after a shoulder has been immobilized for a period of time due to surgery, a fracture, or other injury. Having patients move their shoulders soon after injury or surgery is one measure prescribed to prevent frozen shoulder.

## Diagnosis:

A careful history and physical examination is all that is typically required to make the diagnosis. X-rays may be obtained to evaluate for other causes of shoulder stiffness. Occasionally, an MRI may be required.

## Treatment:

Frozen shoulder generally gets better over time, even without any treatment, although it may take 1-2 years. In a small percentage of people, permanent stiffness may result. The goal of treatment is to control pain and restore motion and strength through physical therapy.

### Nonsurgical Treatment

More than 90% of patients improve with relatively simple treatments to control pain and restore motion.

--Non-steroidal anti-inflammatory medicines. Drugs like aspirin and ibuprofen reduce pain and swelling.

--Steroid injections. Cortisone is a powerful anti-inflammatory medicine that is injected directly into your shoulder joint.



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--Physical therapy. Specific exercises will help restore motion. These may be under the supervision of a physical therapist or via a home program.

## **Surgery:**

The goal of surgery for frozen shoulder is to stretch and release the stiffened joint capsule. The most common methods include manipulation under anesthesia and shoulder arthroscopy.