

Further Information

If you require any further information after reading this booklet, please contact:

Physiotherapy Call Centre
Tel: 01926 600818

Equality Statement

At South Warwickshire NHS Foundation Trust we are fully committed to quality and diversity, both as an employer and as a service provider. We have a policy statement in our Equality Strategy that clearly outlines our commitment to equality for service users, patients and staff:

- You and your family have the right to be treated fairly and be routinely involved in decisions about your treatment and care. You can expect to be treated with dignity and respect. You will not be discriminated against on any grounds including age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex or sexual orientation
- You have a responsibility to treat other service users, patients and or staff with dignity and respect

Our information for patients can also be made available in other languages, Braille, audio tape, disc or in large print.

PALS

We offer a Patient Advice Liaison Service (PALS). This is a confidential service for families to help with any questions or concerns about local health services. You can contact the service by the direct telephone line on 01926 600054, by email: Pals@swft.nhs.uk or by calling in person to the PALS office which is located in the Lakin Road entrance to the hospital.

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Information
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South Warwickshire
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PHYSOTHERPAY DEPARTMENT

Rehabilitation Advice following a Shoulder Dislocation

Patient Information Leaflet

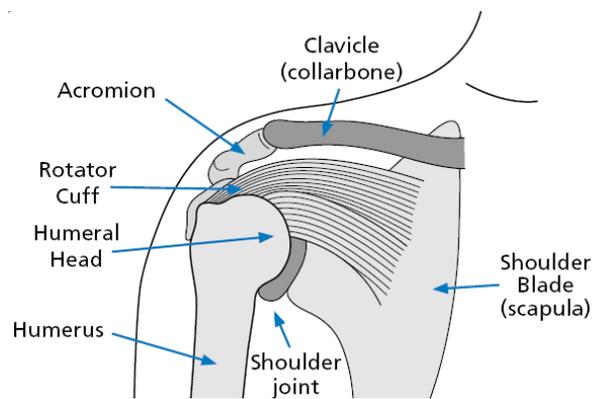
**If you are unable to attend your appointment please
telephone 01926 600818 to cancel your appointment**

Shoulder Dislocation

The shoulder joint is a 'ball and socket' joint. Shoulder movement occurs where the ball at the top of the arm bone (humerus) rotates and slides within its socket (glenoid), which is part of the shoulder blade (scapula).

The shoulder is normally held in its socket by the soft tissue which fits over the joint like a sock. This is then further stabilised by fibrous tissue within the joint capsule, and by the surrounding muscles and ligaments.

The shoulder socket is relatively shallow which allows the shoulder to have a vast range of movement but in return makes it unstable and prone to dislocation during falls and forceful sporting activity.



<http://www.uhb.nhs.uk/Downloads/pdf/PITotalShoulderReplacement.pdf>

The shoulder relies on strong muscles to stabilise the joint. The force which leads to a shoulder dislocation can often tear surrounding muscles, ligaments and tendons. It is therefore imperative to rehabilitate and strengthen the deep muscles of the shoulder (the rotator cuff) to prevent recurrent dislocations and highlights the necessity for thorough rehabilitation.

How Long Do I Wear the Sling?

A poly-sling is provided to assist in keeping the shoulder comfortable and help with the early stages of soft tissue healing. The sling is usually worn for a maximum of three weeks. (If you had a fracture at the same time you will have to wear your sling for up to 6 weeks) It is important to remove the sling regularly to perform gentle exercises to prevent joint stiffness and muscle weakness.

How Long Before I Can Return to Work?

This depends on the physical demands of your job and your rehabilitation progress. Most people are back at work by four weeks unless your job involves significant heavy lifting.

When Can I Drive?

This varies from patient to patient. We advise that you do not drive until your arm is fully mobile and are confident that you can control your vehicle in an emergency situation. We also advise that you inform your insurance company of your recent injury.

Will I Need Physiotherapy?

Most patients are referred for physiotherapy to ensure full recovery. Physiotherapy comprises of three main stages; restoration of shoulder movement, shoulder and scapula strength and shoulder control.

It is imperative that you comply with physiotherapy advice to prevent 'frozen shoulder' (a longstanding shoulder stiffness which can be a complication following an injury) and reduce the likelihood of future dislocations.

It is also imperative to strengthen the muscles surrounding the shoulder following a dislocation. Simple static strengthening exercises can be started from three days following a dislocation. This helps to limit muscle weakness while keeping the shoulder relatively still for soft tissue healing.

Remove the sling four times a day to perform the static strengthening exercises below.

Push against a wall and hold the muscle contraction for 10 seconds. Repeat 10 times in all four positions as demonstrated below.

Push elbow back: Pull hand to stomach: Push elbow away:



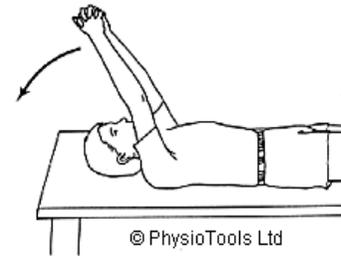
Push towards the wall:



Physiotherapy After Sling Removed

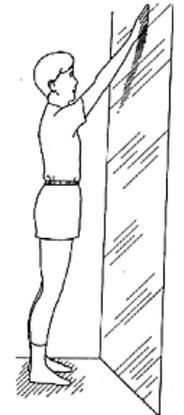
Once the consultant says the sling can be fully removed it is imperative to restore full independent shoulder movements to prevent long standing shoulder stiffness and discomfort.

The exercises below can help to restore movements:

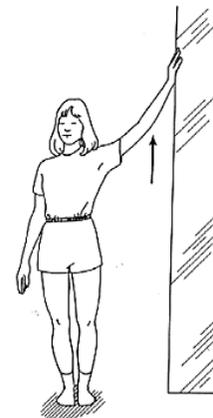


Lying on your back:
Help your affected arm up and over your head with the assistance of your non-affected arm.
Repeat 10 times throughout the day

Facing the wall.
Walk your fingers up the wall aiming to get as high up the wall as possible.
Repeat five times throughout the day.



Stand with your affected side to the wall.
Walk your fingers up the wall aiming to get as high up the wall as possible.
Repeat five times throughout the day.



Shoulder Dislocation Physiotherapy

Once the shoulder has been restored to its normal position the rehabilitation can start. Rehabilitation is essential and can take up to a year to complete fully.

Shoulder pain and difficulty sleeping can be a problem, particularly in the first three weeks following a shoulder dislocation. Your doctor may prescribe medications for pain relief or you can control the pain with basic painkillers such as paracetamol. Research supports the use of regular pain relief to help with a speedy recovery.

An ice pack (e.g. pack of peas wrapped in a damp towel) placed on the shoulder for 10-15mins can help to reduce shoulder soreness.

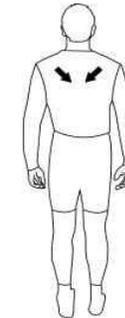
Physiotherapy exercises will ease shoulder discomfort and restore shoulder function. It is normal to feel some discomfort, aching or stretching when you perform exercises. However if you experience intense and lasting pain (e.g. more than 30mins) it may be an indication to change the exercises, by doing them either less forcefully or less often. If the pain continues then discuss your exercise regime with your physiotherapist or doctor.

Do short frequent exercise sessions (e.g. 5-10 mins, 4 times a day rather than one long session daily).

Gradually increase the number of repetitions of each exercise as the days go by.

Physiotherapy Immediately following Shoulder Dislocations

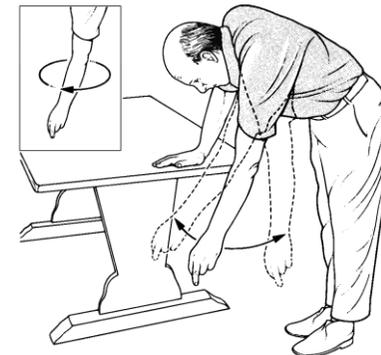
Arm slings encourage poor neck and shoulder posture so it is advisable to remove the sling regularly to stretch and move your neck, elbow and wrist through their full range of movement. The exercises below should be performed four times a day.



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Regularly rest your arms by your side and then squeeze your shoulder blades together for 10 seconds to open your chest and pull the shoulders back

PENDULUM EXERCISES



Remove sling, lean forward over a table. Gently swing your arm

- Forwards & Backwards,
- Side to Side
- Circular Motions