WILLIAMS INTEGRACARE CLINIC

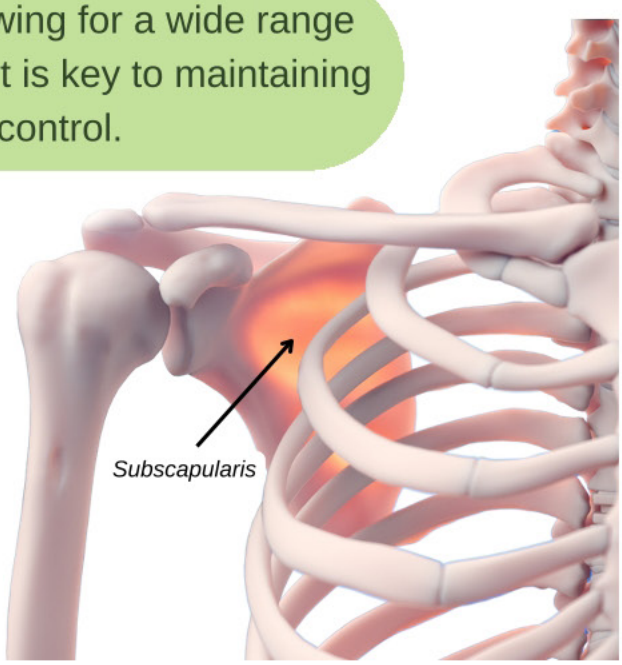
CONSERVATIVE SHOULDER & ELBOW CARE

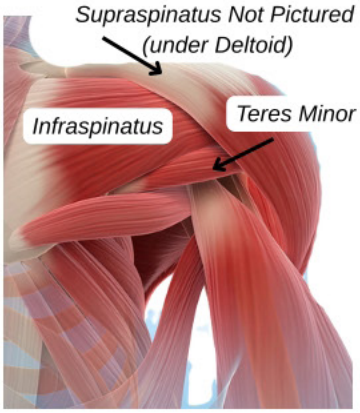
A WELL ROUNDED APPROACH TO SHOULDER AND ELBOW CARE

The shoulder is the most mobile joint in the body, allowing for a wide range of motion. **STRENGTHENING** & **STABILIZING** the joint is key to maintaining a healthy balance between mobility and control.

The shoulder is a complex joint system in which the scapula, glenohumeral joint, and clavicle must work together efficiently to ensure proper function.

- The glenohumeral (shoulder) joint is a ball-and-socket joint that connects the upper arm (humerus) to the shoulder blade (scapula).
- Arm elevation up to 90 degrees is achieved through the glenohumeral joint alone.
- Any overhead motion above 90 degrees further requires coordinated scapular rotation and clavicular movement.





THE ROTATOR CUFF IS A GROUP OF 4 MUSCLES:

SUPRASPINATUS, INFRASPINATUS, SUBSCAPULARIS & TERES MINOR

These muscles work together to stabilize the head of the humerus within the shoulder joint. They play a key role in maintaining joint integrity and controlling shoulder mobility, making them essential for both protection and full range of motion.

Efficient mechanics during daily tasks, exercise, and recreational activities can significantly reduce strain on the upper extremity. Physical therapy can offer personalized strategies for lifting, throwing, racket sports, and other movements to address current shoulder issues and minimize future injury risk.

Proper scapular control supports improved shoulder strength, power, range of motion and can help reduce pain & improve daily function.

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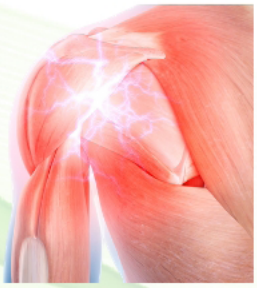
COMMON SHOULDER DIAGNOSES:

- SHOULDER IMPINGEMENT:
  - Compression of soft tissues within the shoulder joint, often leading to inflammation, and can at times radiate down the arm. This can also correlate with bursitis and/or tendinitis.
- SHOULDER ARTHRITIS
  - Degeneration of joint cartilage, typically due to age-related wear and tear, resulting in pain and stiffness.
- ROTATOR CUFF TEAR
  - Partial or complete tearing of one or more of the four rotator cuff muscles, commonly causing weakness, pain, and limited mobility.
- BURSITIS OR TENDINITIS
  - Inflammation of the bursa or tendon, frequently related to repetitive motion, overuse, and inefficient shoulder mechanics.

Adhesive capsulitis, or **"frozen shoulder",** is a condition marked by pain, significant stiffness, and a progressive loss of shoulder mobility. It typically develops gradually and advances through three stages: freezing, frozen, and thawing. Physical therapy can play a key role in guiding patients through each stage, supporting functional improvement, pain management, and restoration of movement.



SHOULDER & ELBOW TENDON CONDITIONS: TENDINITIS VS TENDINOPATHY

Feature	TENDINITIS	TENDINOPATHY
Type of condition	Acute	Chronic
Cause	Sudden injury or overuse	Prolonged or unresolved tendinitis
Tissue State	Inflammation & irritation of tendon	Degenerative changes in the tendon
Pain Timing	Pain **during** activity	Pain **after** activity
Inflammation	Yes	No or minimal inflammation
Common Locations	Shoulder, elbow, wrist	Shoulder, elbow, wrist
Treatment Focus	Rest, inflammation management, gradual loading	Tissue remodeling, progressive strengthening

ELBOW TENDINITIS: Lateral Epicondylitis ("Tennis Elbow") & Medial Epicondylitis ("Golfer's Elbow") are common sources of elbow pain, often resulting from overuse, repetitive movements, or inefficient movement patterns. Treatment typically involves reducing aggravating activities, using soft tissue mobilization, and strengthening the entire upper extremity—from the forearm to the shoulder blade. This approach helps restore strength and improve mechanics for daily tasks & hobbies.

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