Shoulder Bursitis

The shoulder is perhaps one of the most complex joints to treat due to the number of bones and muscles involved during normal shoulder movement.

An injury to any part of the shoulder can result in abnormal movement and further increases in pain and discomfort.

Between the surfaces of the joints and muscle attachments are fluid filled sacs (bursa) that protect the muscle and tendons from friction against the bone surface.

Bursitis, the term for inflammation or swelling of the bursa can result when the tendon or joint places more pressure on the bursa as a result of a change in the manner in which the arm is being moved. The pressure causes more friction and subsequent swelling of the bursa.

Bursitis can develop over time due to poor posture or a sudden increase in a specific sport or activity. Alternatively a direct fall onto the shoulder or a blow to the shoulder can also cause bursitis.

The most common affected bursa in the shoulder is the sub-acromial bursa. The bursa lies in a space created below where the shoulder and collar bone join.

Symptoms

Bursitis causes pain on the point of the shoulder with any applied pressure, there may be some minor swelling.

Movement of the arm is limited in all directions, particularly movements that involve reaching above shoulder height or across the body.

Diagnosis of bursitis can normally be made by means of manual tests. Ultrasound can also accurately diagnose bursitis.

Treatment

The main priority is to reduce pain and regain full movement of the arm. Various techniques may be used to do so; including massage, acupuncture/ dry needling and taping.

It is also important to ensure that the control of movement is correct. Physiotherapists will address tight or weak muscles that cause poor control of normal shoulder movement and will advise you on specific exercises aimed to correct this.

Finally, the focus is to ensure enough muscle endurance and strength to prevent a recurrence of bursitis.