



Rotator cuff related shoulder pain

Information and exercise leaflet

What is rotator cuff related shoulder pain?

Rotator cuff related shoulder pain (RCRSP) is the name given to the problem when the structures within the uppermost part of the shoulder joint complex become painful as you lift the arm. RCRSP affects approximately 20% of people at some time during their lifetime.

Why have I got RCRSP?

The shoulder is a 'ball and socket' joint with a ligament above it which forms an arch. The space underneath the arch is called the sub-acromial space. The structures within this space include the subacromial bursa (a fluid-filled sac) and tendons of the rotator cuff muscles. In RCRSP, the structures within this space do not function effectively to keep the ball centred within its socket, ultimately causing pain. Structural changes can also decrease the size of this space causing pain.

Almost everyone will experience some degree of pain due to the day-to-day activities that we perform with the arm above shoulder level. It may become a problem for some people and pain may disturb their normal activities. This is when treatment is needed.

What are the Symptoms of RCRSP?

- Pain on movement, may feel like it is 'catching'.
- Painful when lying on the affected side
- Pain when elevating the arm, particularly if lifting a weight
- Reduced strength and range of movement due to pain

Will it get better?

Between 50 and 60% of patients with RCRSP get better with Physiotherapy. However, it can take up to 6 months to get the full benefits of treatment. Most patients will start to see an improvement in their symptoms within 6-12 weeks.

**Remember: Understanding your problem is the key to your recovery
so, if anything isn't clear
please do ask your health care professional.**

Treatment of RCRSP involves:

1. **Rest** – This does not mean total rest but a period avoiding those activities that specifically aggravate your pain. Your Physiotherapist will show you how to keep your shoulder working but to avoid pain.
2. **Painkillers and Non-Steroidal Anti-Inflammatory medications** which will have been prescribed by your GP/Doctor.
3. **Physiotherapy** – Involves exercises to restore normal movement in the shoulder. You will be shown a series of exercises. The most important part of treatment is your home exercise programme.
4. **Injections** – Occasionally, if people are having lots of problems sleeping or are struggling to comply with their advised exercises and management, injections may be used to reduce pain and help them do the necessary physiotherapy.
5. **Surgery** – Some patients do not respond to the physiotherapy programme so surgery may be required. The surgical options can be discussed with the surgical team.

What can I do to help myself?

- Comply with the physiotherapy programme as advised
- Exercise regularly
- Maintain a good posture
- Avoid aggravating activities such as overhead work and repetitive lifting above shoulder height
- Take regular breaks or changes of activity if your hobbies / work demand overhead work or work above shoulder height.

Exercises

The aim of these exercises is to help you regain normal movement. Aim for 8 repetitions of each exercise and build up as tolerated, try to perform 3 sets.

Key points

- Build your exercises into your daily routine.
- Try to do the exercises 6 times a week with one day of rest.
- You do not have to do all three exercises at once, you can build up slowly as you gain more confidence.

Exercise 1



Wall slide into flexion

Find a smooth wall or wall mirror and cloth/ towel that will slide easily on the wall (or put clean socks on your hands).

Stand facing the wall. Place the edges of your hands against the wall with your thumbs facing you. Now step forwards as you gently push into the wall and slide your hands up as far as you can. Relax and return to the start position.

Repeat 8 times, rest for 1 minute. Repeat 8 times, rest for 1 minute. Repeat 8 times.

Exercise 2

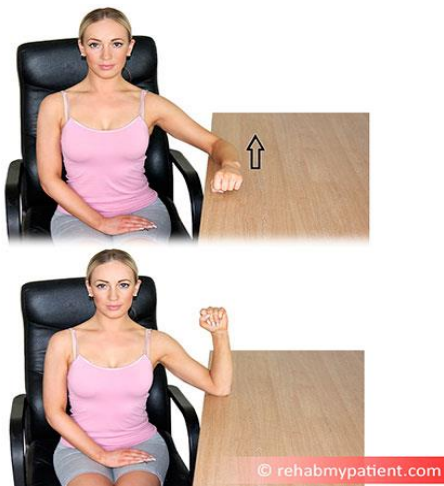


Wall press up

Place your hands on the wall as though you are going to do a push up. Hands should be wider than your shoulders, with your hands turned out slightly and elbows are below your shoulder. Lower your body towards the wall keeping your body nice and tall.

Repeat 8 times, rest for 1 minute. Repeat 8 times, rest for 1 minute. Repeat 8 times.

Exercise 3



Supported rotation in sitting

Sit next to a table with your elbow supported below shoulder height. You may want to rest your elbow on a rolled-up towel for comfort.

Gently make a fist, keep your elbow bent and then rotate your forearm to point upwards. Return to the start position and relax.

Repeat 8 times, rest for 1 minute. Repeat 8 times, rest for 1 minute. Repeat 8 times.

Remember don't stop moving your shoulder, muscles need movement to keep healthy.

If your sleep is affected you can try to support your arm on a pillow

Step towards things rather than stretching to reach them

Gentle exercise can help with recovery so keep other activities going that you enjoy to keep yourself fit

If you don't exercise regularly, try and build up to a brisk walk 3 times a week

What actions can I take to improve my health?

Evidence tells us that making healthy lifestyle choices can have a big impact on influencing problems with your muscles and bones and can play a major role in your overall health. Some of the most effective areas to address are below: (click on the links)

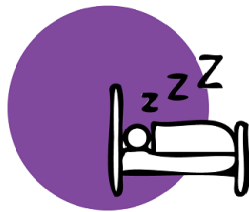
Maintaining a healthy weight

Link: www.nhs.uk/live-well/healthy-weight/



Avoiding poor sleep patterns

Link: www.nhs.uk/live-well/sleep-and-tiredness/how-to-get-to-sleep/



Stopping smoking

Link: www.nhs.uk/live-well/quit-smoking/



Increasing levels of physical activity

Link: www.nhs.uk/live-well/exercise/



Reducing alcohol consumption

Link: www.nhs.uk/live-well/alcohol-support/calculating-alcohol-units/



Maintaining a healthy mind

Link: www.nhs.uk/conditions/stress-anxiety-depression/



The **good news** is that you can influence lots of these by modifying your lifestyle.

Therefore, it is important that you consider addressing these areas alongside your current treatment.

You may wish to discuss any of these factors with your treating clinician who will be able to work with you and guide your long- term management and support you to improve your wellbeing.

There will be information about the local services that exist within the waiting areas of the physiotherapy department and your treating clinician will be able to help signpost you to appropriate services.

There are some websites below that give more information on local services available:

- Blackburn and Darwen: <https://refreshbwd.com/>
- East Lancashire: <http://www.upandactive.co.uk/>
- Public Health England: <https://www.gov.uk/government/organisations/public-health-england>

Applications (Apps)

The ORCHA website will recommend useful and rated apps to support your wellbeing.
<https://www.orchha.co.uk/>

Aims of Physiotherapy:

Physiotherapy may form one part of your management, helping you identify the main contributory factors whilst working together to plan your rehabilitation.

Your physiotherapist may spend time talking with you about your shoulder pain providing advice, reassurance and helping discuss any concerns you may have.

As mentioned previously, exercise is one of the most effective treatments for shoulder pain.

A physiotherapist can provide and help oversee a personalised exercise programme focused on what you want and need your body to achieve.

Warning Signs

If you have severe pain which is getting worse over several weeks, if you are unwell, or under the age of 16 years, you should consult your doctor.

The following symptoms are very rare, but if you suddenly develop any of them, you should consult your doctor straightaway.

- Significant swelling to the arm
- Feeling generally unwell
- Sign of infection i.e. does your joint feel hot and swollen to touch compared to the other side, night sweats that are out of the ordinary, high temperature and feeling unwell.
- Constant night pain (unable to rest/sleep)
- Unexplained weight loss
- Loss of feeling such as numbness or pins and needles in your hand / wrist / arm
- Loss of control of hand movements or strength or grip (dropping objects)

If your symptoms fail to improve within 6 weeks with this regime you should contact your doctor for a physiotherapy referral.

If you require this document in an alternative format or language, please contact:

Integrated Musculoskeletal / Physiotherapy Service / Head Office: Accrington Pals Primary Health Care Centre, Paradise Street, Accrington, Lancs BB5 2EJ

Tel: 01254 736041 Email: elmsk@nhs.net

Polish

W celu otrzymania tego dokumentu w innym formacie lub języku, prosimy o kontakt z

Punjabi

ਜੇ ਤੁਸੀਂ ਇਸ ਦਸਤਾਵੇਜ਼ ਨੂੰ ਕਿਸੇ ਵਿਕਲਪਿਕ ਫਾਰਮੈਟ ਜਾਂ ਭਾਸ਼ਾ ਵਿੱਚ ਲੋੜੀਂਦੇ ਹੋ, ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਸੰਪਰਕ ਕਰੋ

Urdu

اگر آپ کو اس دستاویز کی ایک متبادل شکل (فارمیٹ) یا زبان میں ضرورت ہے تو براہ مہربانی رابطہ کریں

Bengali

আমনি যদি এই প্রচারপত্রটি অন্য কোন আকারে বা অন্য ভাষায় চান, তাহলে যোগাযোগ করবেন

Romanian

Dacă aveți nevoie de acest document într-un format sau limbă alternativă, vă rugăm să contactați

Lithuanian

Norint gauti šį dokumentą kitu formatu ar kita kalba, prašome susisiekti su mumis

Department Contact Details:

Author: Integrated Musculoskeletal / Physiotherapy Service	Upper Limb SIG
ID No: PHYSIO - 003 – Rotator cuff related shoulder pain	Version 1
Date of Issue: October 2024	Review Date: October 2026
Contact details: Integrated Musculoskeletal Service / Head Office: Accrington Pals Primary Health Care Centre, Paradise Street, Accrington, Lancs BB5 2EJ Tel: 01254 736041 Email: elmsk@nhs.net Web: www.elht.nhs.uk	
Images provided by Rehabmypatient – permission gained.	