

PainOptions

Get The Basics Right How to manage shoulder pain



Thorough assessment

This should include a detailed history about your injury, symptoms, occupation, general health and a physical examination which screens for significant injury or health conditions. The need for further investigations and the treatment you receive should depend on the findings of this assessment.

Early imaging should be avoided for most shoulder pain

Imaging (x-rays and scans) should initially be avoided unless serious injury is suspected (such as fracture). A thorough assessment helps determine if imaging is required for each person. Typically, imaging should only be considered for others if your pain persists after first attempting a course of 'active treatment'.

Simple medication, heat and ice for pain relief

Simple analgesics such as paracetamol and non-steroidal anti-inflammatories are often effective. Your doctor can advise you what is most appropriate. Use of heat or ice packs may also help.

Stay active, exercise and resume normal activities and work as soon as possible

Exercise programs prescribed by a physiotherapist or exercise physiologist have been proven to significantly reduce the need for surgery whilst safely delivering long term improvement. Resuming normal activities as soon as possible will optimise your recovery. Your healthcare practitioner should guide safe return to work and daily activities based on your individual circumstances.

Additional treatments: manual therapy, acupuncture, injections

Manual treatments such as massage and acupuncture can be beneficial when combined with prescribed

exercises. Corticosteroid injections may also be appropriate for those who have had limited improvement after an initial course of active treatment.

Consider the effect of other factors

For some people with ongoing shoulder problems, factors such as poor sleep, low mood and increased stress or worry can amplify symptoms. It is important that you help your healthcare practitioner to identify and understand how these factors may be affecting your recovery.

Set goals, monitor improvement, and be involved in your recovery

People who are involved in planning their treatment and linking it to their goals typically do better. Your healthcare practitioner should use 'outcome measures' such as questionnaires and functional tests to review your progress at planned intervals (i.e. two, six, 12 weeks) to make sure you are on track.

Specialist review

Most shoulder pain (including bursitis, impingement and most tendon tears) will improve with active treatment. Referral to a Specialist or Surgeon may be considered in cases of significant trauma or when there has been limited improvement following three months of active treatment.

These guidelines are based on current best evidence: Clinical Practice Guidelines for the Management of Rotator Cuff Syndrome in the Workplace. UNSW (2013)

Practical Solutions for Complex Problems