Shoulder Subluxation

What is a shoulder subluxation?

A shoulder subluxation is a temporary, partial dislocation of the shoulder joint. The shoulder is a ball and socket joint. The ball of the upper arm bone (humerus) is held into the socket (glenoid) of the shoulder blade (scapula) by a group of ligaments.

How does it occur?

A shoulder subluxation can occur from falls onto your outstretched arm, direct blows to your shoulder, or having your arm forced into an awkward position. If you have had a previous injury or if your shoulder ligaments are naturally loose you may sublux your shoulder doing simple activities like throwing or putting on a shirt or jacket.

What are the symptoms?

Symptoms of a shoulder subluxation include:

- the feeling that your shoulder has gone "in and out of joint"
- · looseness in your shoulder
- pain, weakness, or numbness in your shoulder or arm

How is it diagnosed?

Your doctor will talk to you about your symptoms and

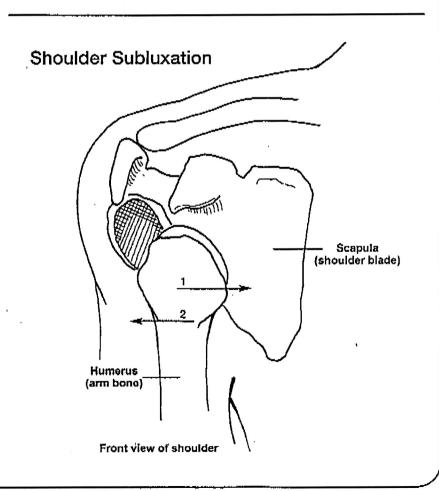
perform a physical exam. Many times the diagnosis of a shoulder subluxation is made by your description of the injury. When your doctor examines you they may find that your shoulder is loose and may partially slip out of joint during the exam. Your doctor may order x-rays to see if you have had any fractures.

What is the treatment?

The pain from a shoulder subluxation is treated with ice packs for 20 to 30 minutes 3 to 4 times a day. You may take an anti-inflammatory medication, such as ibuprofen. You may need to avoid painful activities until the pain improves.

The most important treatment for the looseness in the shoulder that causes a subluxation is shoulder strengthening exercises.

Shoulders that continue to sublux and cause painful symptoms may require surgery to correct the joint looseness.



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When can I return to my sport or activity?

The goal of rehabilitation is to return you to your sport or activity as soon as is safely possible. If you return too soon, you may worsen your injury, which could lead to permanent damage. Everyone recovers from injury at a different rate. Return to your

sport or activity is determined by how soon your shoulder recovers, not by how many days or weeks it has been since your injury occurred.

You may safely return to your sport or activity when:

- your injured shoulder has full range of motion without pain
- your injured shoulder has regained normal strength compared to the uninjured shoulder.

In throwing sports, you must gradually build your tolerance to throwing. This means you should start with gently tossing and gradually throw harder.

Shoulder Subluxation Rehabilitation Exercises

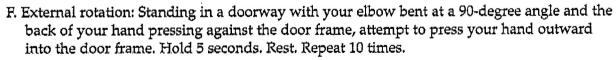
Do these exercises as soon as your doctor says you can.

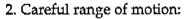
PART I

l. Isometrics:

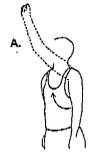
- A. Adduction: With a pillow between your chest and your arms, squeeze the pillow with your arms and hold 5 seconds. Release and repeat 10 times.
- B. Flexion: Stand facing a wall with your elbow bent at a right angle and held close to your body. Press your fist forward against the wall, hold this for 5 seconds, then rest. Repeat this 10 times.
- C. Extension: Standing facing away from the wall with your elbow touching the wall, press the back of your elbow into the wall and hold for 5 seconds. Rest. Repeat 10 times.
- D. Abduction: Standing with your injured side towards the wall and your elbow bent at a 90-degree angle, press the side of your arm into the wall as if attempting to lift it. Hold for 5 seconds. Rest. Repeat 10 times.
- E. Internal rotation: Standing in a doorway with your elbow bent at a 90-degree angle and your palm resting on the door frame,

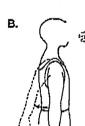
attempt to press your palms into the door frame and hold 5 seconds. Rest. Repeat 10 times.

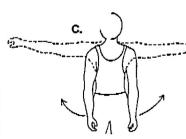




A. Flexion: Standing with your arms straight, raise your arm forward and up over your head. Hold this position for 5 seconds. Return to the starting position and repeat 10 times.

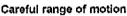






isometrics







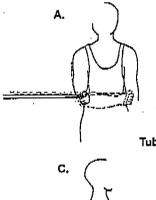
Shoulder Subluxation Rehabilitation Exercises

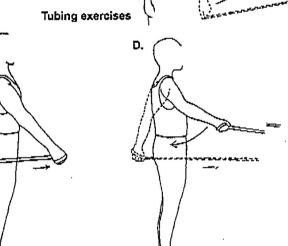
- B. Extension: Standing with your arms straight, move your arm backward while keeping your elbow straight. Hold this position for 5 seconds. Repeat 10 times.
- C. Abduction: Standing with your arms at your side, slowly raise your arms out away from your body and hold in position for 5 seconds. Return to the starting position. Repeat 10 times.
- D. Elbow flexion: Standing, bend your elbow, bring your hand toward your shoulder. Return to starting position. Repeat 10 times. As this becomes easier, add a weight to your hand to give you some resistance.

PART II

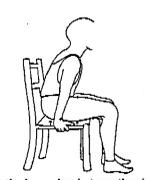
- 3. Tubing exercises:
 - A. Internal rotation: Using tubing connected to a door knob or other object at waist level, keep your elbow in at your side and rotate your arm inward across your body. Make sure you keep your forearm parallel to the floor. Repeat 10 times. Do 2 sets of 10.
 - B. Adduction: Stand sideways with your injured side toward the door and out approximately 8 to 10 inches. Slowly bring your arm next to your body holding onto the tubing for resistance.

 Repeat 10 times. Do 2 sets of 10.
 - C. Flexion: Facing away from the door with the tubing connected to the door knob, keep your elbow straight and pull your arm forward. Repeat 10 times. Do 2 sets of 10.
 - D. Extension: Using the tubing, pull your arm back. Be sure to keep your elbow straight. Repeat 10 times. Do 2 sets of 10.
- 4. Latissimus dorsi strengthening: Sit on a firm chair. Place your hands on the seat on either side of you. Lift your buttocks off the chair. Hold this position for 5 seconds and then relax. Repeat 10 times. Do 2 sets of 10.





Tubing exercises



Latissimus dorsi strengthening