

Shoulder pain

This sheet has been written for people with a painful shoulder. It provides general information about shoulder pain and what can be done to help it. It also tells you where to go for further information.

What is shoulder pain?

Shoulder pain is pain that is felt in the shoulder area, at the top of the arm. It is a sign that the joints, muscles or other parts of the shoulder are injured, strained or not working properly. About one in 10 people experience shoulder pain at some time in their lives.

What are the symptoms?

Shoulder pain is most commonly felt in the front of the shoulder or in the upper part of the arm. Pain is usually felt when moving the arm and you may notice it with only certain movements. Most shoulder problems do not cause pain when the arm is not moving. However many people find it painful when lying on the sore side in bed at night. Pain that travels right down to your hand, with tingling in your fingers, may be from a problem with your neck, rather than your shoulder.

What causes it?

The shoulder is the most flexible joint in the body. There are many muscles and other structures in the area that can cause problems. In most cases of shoulder pain it is not possible to find a cause of the pain. It can be worrying not knowing exactly what is wrong. The good news is that research shows you do not need to know the exact cause of the pain to be able to deal with it successfully. It is rare for shoulder pain to be caused by a serious medical problem.

Should I see a doctor?

You should talk to your doctor or other health professional if your pain is bothering you. They will ask you about your symptoms and examine the movement of your shoulder. In most cases tests such as x-rays, ultrasounds and blood tests are not helpful in finding out the cause of shoulder pain unless there has been an obvious injury or strain. Your doctor may check for any

serious medical problems that could be causing your pain, but these are rare. You should see your doctor if:

- you have shoulder pain after a fall or accident
- your pain does not settle down or starts getting worse, especially if you have pain when you are resting your shoulder
- you have symptoms such as losing weight, fever or night sweats.

What will happen to me?

For most people shoulder pain settles down fairly quickly. This usually takes several weeks but can vary between people. At least one in two people with shoulder pain will have fully recovered within six months. Unfortunately shoulder pain can return, even in people who have fully recovered. It is not possible to predict which cases of shoulder pain will return.

What can I do?

1. **Talk to your healthcare team.** It is normal to worry about the cause of your pain and how it will affect you. Talking to your doctor or other health professional about your worries can be helpful. You will usually find there is no serious cause and there are ways you can deal with it.
2. **Learn ways to manage pain.** Talk to your healthcare team about ways to relieve your pain. For example, there are medicines that can help with shoulder pain. Always talk to your doctor or pharmacist about your medicines, as even natural or over-the-counter medicines can have side effects. See the *Medicines and arthritis* and *Dealing with pain* information sheets.

For your local Arthritis Office:

1800 011 041 www.arthritisaustralia.com.au

3. Stay active. Your shoulder is designed for movement. The sooner you get your movement and strength back, the sooner your shoulder will feel better. You may need to rest or reduce some activities when the pain is bad. But resting for more than a day or two usually does not help and may do more harm than good. See a physiotherapist or other health professional for advice about exercises to keep your shoulder moving. See the *Working with your healthcare team* information sheet for more information about seeing a physiotherapist.

4. Acknowledge your feelings and seek support. It is natural to feel scared, frustrated, sad and sometimes angry when you have pain. Be aware of these feelings and get help if they start affecting your daily life. See the *Arthritis and emotions* information sheet.

There are many other treatments for shoulder pain that have not been well proven. If a treatment has not been proven, it does not necessarily mean it will not help

you. It may mean that more research is needed. These treatments include:

- acupuncture
- mobilisation of the shoulder
- transcutaneous electrical nerve stimulation (TENS).

Your healthcare team can give you more advice and information about whether any of these or other treatments might be useful for you. See the *Dealing with pain* information sheet for more tips on managing pain.

CONTACT YOUR LOCAL ARTHRITIS
OFFICE FOR MORE INFORMATION SHEETS
ON ARTHRITIS.

Shoulder pain is common but is rarely due to any serious disease.
Staying active will help you get better faster and prevent more problems.

For more information:

Books: Carey, Anthony 2005, *The pain-free program: A proven method to relieve back, neck, shoulder, and joint pain*, J Wiley, Hoboken, NJ.

Websites: The Arthritis Research Campaign www.arc.org.uk
The National Health and Medical Research Council (NHMRC) has an information sheet on acute shoulder pain available only via the internet at www.nhmrc.gov.au

The Australian Physiotherapy Association can help you 'find a physio' at www.physiotherapy.asn.au

© Copyright Arthritis Australia 2007. Reviewed January 2011. **Source:** A full list of the references used to compile this sheet is available from your local Arthritis Office. The Australian General Practice Network, Australian Physiotherapy Association, Australian Practice Nurses Association, Pharmaceutical Society of Australia and Royal Australian College of General Practitioners contributed to the development of this fact sheet. The Australian Government has provided funding to support this project.

Your local Arthritis Office has information, education and support for people with arthritis
Freecall 1800 011 041 www.arthritisaustralia.com.au

Disclaimer: This sheet is published by Arthritis Australia for information purposes only and should not be used in place of medical advice.