

Hunter Hand & Upper Limb Therapy

Providing specialised treatment for:

- Impingement
- Rotator cuff disease
- Instability
- Frozen shoulder
- Osteoarthritis
- Postural dysfunction
- Dislocations
- Fractures
- Carpal tunnel syndrome
- DeQuervain's tenosynovitis
- Mallet finger
- Tendon injuries
- Overuse injuries

Plus general physiotherapy



*“Shoulders, elbows and hands
are our business”*



Shoulder Instability

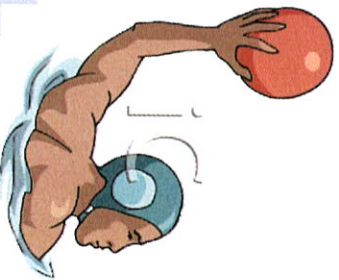
*Information
brochure*



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What is Instability?

The shoulder joint is like a large ball sitting in a shallow socket and is very flexible. Instability is a painful shoulder problem that occurs when the structures that surround the glenohumeral (shoulder) joint do not work to maintain the ball within the socket. If the joint is too loose, it may slide partially out of place, a condition that is called subluxation. If the joint comes completely out of place, this is called a shoulder dislocation. People with shoulder instability often complain of an uncomfortable sensation that their shoulder feels like it is about to slide out of place. Most shoulder dislocations occur when the arm is forcefully twisted outwards when it is overhead.



Who is at Risk?

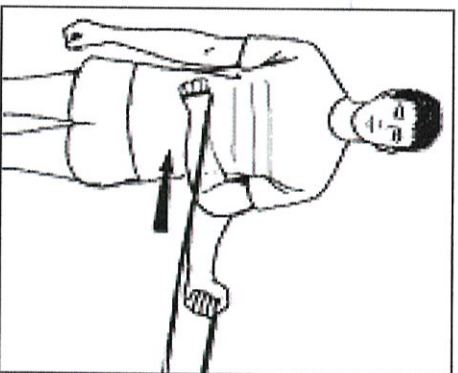
People who have had a previous dislocation can develop chronic instability because the ligaments are over-stretched and sometimes torn. If you are under 35 years of age and sustain a dislocation you have an 80% chance of developing shoulder instability.

Young athletes are at risk, particularly with overhead sport such as water polo, volleyball and swimming. The soft tissue structures in their shoulders can become stretched, which may lead to instability.

Naturally occurring laxity can occur in some people without injury, and this can make them vulnerable to instability.

What are the treatment options?

Treatment depends on several factors and usually begins with an exercise programme prescribed by your physiotherapist. These will be aimed specifically at strengthening the shoulder to prevent further problems.



If you do dislocate your shoulder it is important to commence physiotherapy early to reduce the risk of re-dislocation.

Sometimes cortisone injections or anti-inflammatory medications may be used for pain relief.

If therapy fails, surgery may be considered. There are many different types of surgery for instability but they are all aimed at tightening the loose ligaments in the shoulder. Extensive rehabilitation is required following surgery and your physiotherapist will guide you through this.

The best chance of avoiding further dislocation is by managing it well the first time.

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