

Post-Surgical Rehabilitation of Capsular Release or Manipulation under Anaesthesia

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What is the shoulder joint?

The shoulder joint is an articulation between the top of the arm bone (humerus) and the shoulder blade (scapula). It is a ball and socket-type joint and one of the most able to move around joints in the body. The main muscles which stabilise the joint are collectively known as the rotator cuff.

Occasionally, the shoulder joint can get very stiff and painful. This can sometimes happen after surgery, injury to the shoulder joint or without any clear cause. Frozen shoulder is a painful condition where the shoulder movements become restricted over the time. It is thought to occur when the tissue around the shoulder joint, known as the capsule, becomes inflamed and thickened. It is not fully understood why this process happens but your risk of developing the condition can raise with certain health conditions. Although most cases improve on their own with time, if the case is severe, an orthopaedic consultant may consider surgical options. The two procedures that are used to help are a capsular release and a manipulation under anaesthetic (MUA).

What is a capsular release?

A capsular release is a keyhole (arthroscopic) surgery to cut tight capsular tissues in the shoulder joint, allowing the shoulder to move more freely.

What is an MUA?

An MUA is a non-invasive procedure that aims to increase the movement in the shoulder joint. The surgeon stretches the shoulder capsule whilst you are under anaesthetic. The surgeon may also inject a local anaesthetic or steroid into the joint to help with pain.

What should I expect after my procedure?

Pain relief

Sometimes a nerve block is used during surgery. During the time your nerve block is working, which may be for roughly 24 hours, your arm may feel heavy and numb. As the nerve block wears off you may experience pins and needles and it is normal to start to feel pain. At this stage it is important to take your painkillers as prescribed.

Wearing a sling

You may return from the procedure wearing a sling. However, this is for comfort only for the first few hours. Do not keep your arm in the sling for long periods and discard the sling as soon as possible.

Ice

Ice packs can be helpful to reduce pain. Be sure to protect your dressings from getting wet. In a damp towel wrap a bag of ice/frozen peas and apply for 10 to 20 minutes. Apply as required.

Wound care

Your surgical wounds will need to be kept clean and dry. Prior to your discharge, the nursing staff will give further information about wound care.

Occupational Therapy

Occupational therapy helps you live your best life at home, at work – and everywhere else. It is about being able to do the things you want and have to do, that could mean helping you overcome challenges learning at school, going to work, playing sport or simply doing the dishes. Everything is focused on your wellbeing and your ability to participate in activities.

If you feel that your shoulder injury is causing any problems with function, independence and doing things that you enjoy, a referral to your local hand therapy team may be useful. We have teams based on all four sites (Lincoln, Boston, Grantham and Louth).

Post-operative physiotherapy

It is essential that you begin to move your arm as soon as possible after these procedures. The more you move your arm in all directions the more likely you will achieve a positive outcome. Out-patient physiotherapy will usually begin 1 to 3 weeks after the procedure to review your movement and continue your rehabilitation. Your physiotherapist or consultant will give you guidance on returning to work, driving and sporting activities. The latter depends on your movement and developing your muscle strength.

Shoulder exercises

Pendulum



Instructions

Lean forward. Swing the arm in a circle in a pendula motion as though your hand is a weight on the end of a piece of string.

Repeat 5 to 10 times, 3 times a day.

(Repetitions can be increased if you find them easy, or decreased if you find them more difficult)



Lean forward. Swing the arm backwards and forwards. All in a pendula motion as though your hand is a weight on the end of a piece of string.

Repeat 5 to 10 times, 3 times a day.

(Repetitions can be increased if you find them easy, or decreased if you find them more difficult)



Lean forward. Swing the arm to the left and right in a pendula motion as though your hand is a weight on the end of a piece of string.

Repeat 5 to 10 times, 3 times a day.

(Repetitions can be increased if you find them easy, or decreased if you find them more difficult)

Hands behind Head Stretch



Instructions

Lying on your back put your hands behind your head and slowly stretch your elbows out to the bed.

Repeat 5 to 10 of each direction, 3 times a day.

(Repetitions can be increased if you find them easy, or decreased if you find them more difficult)

External rotation with stick



Instructions

Lie on your back and hold a stick in each hand. Keep your elbows bent. Use your good hand to push your painful arm out to the side so your arm drops outward.

Repeat 5 to 10 times, 3 times a day.

(Repetitions can be increased if you find them easy or decreased if you find them more difficult)

Flexion towel slide on table



Instructions

Rest your hands resting palm down on a towel on a table.



Slide your hands forwards as far as possible as you lean forward. This exercise improves flexion in your shoulder.

Repeat 5 to 10 times, 3 times a day.

(Repetitions can be increased if you find them easy or decreased if you find them more difficult)

Abduction with a pulley



Instructions

Sit under a pulley system and hold the handles.

Keep your injured arm at your side with the other arm above your head.



Pull the non-injured arm down so it raises your injured arm out to the side and then slowly lower the injured arm down with the support of your other arm.

Repeat 5 to 10 times, 3 times a day.

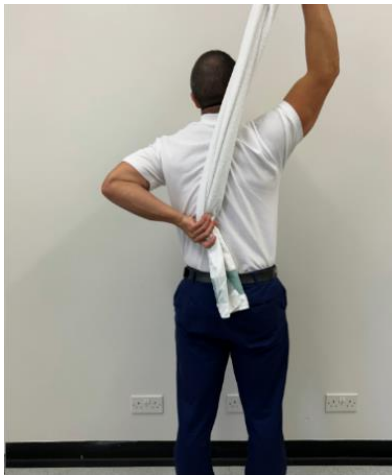
(Repetitions can be increased if you find them easy or decreased if you find them more difficult)

Towel behind back



Instructions

Your good arm holds the towel above your head and your sore arm relaxes behind your back.



Lift your sore arm by pulling upwards with your good arm. Repeat 5 to 10 times, 3 times a day.

(Repetitions can be decreased if you find them difficult)

Towel slide abduction



Instructions

Sit next to a table and rest your forearm on the table. Slide your arm away from you as far as you can as you lean in towards the table. Repeat 5 to 10 times, 3 times a day.

(Repetitions can be increased if you find them easy or decreased if you find them more difficult)

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You can contact your consultant via the hospital switchboard if required.

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