

# Arthritis in shoulder can be treated

By Kyle Swanson

Arthritis affects approximately 50 million to 65 million Americans and those numbers will almost double by 2030.

Most people associate hips and knees with arthritis pain, but the shoulder is also commonly affected. Osteoarthritis is the most common type of arthritis. It is simply the breakdown or loss of cartilage over time. Without cartilage, the joint doesn't move as well, causing inflammation and pain.

There are many factors involved in the development of shoulder osteoarthritis. These include trauma to the shoulder, repetitive high demand use, genetics and age. Most patients have been active throughout their lives and have sustained injuries to the affected shoulder.



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Symptoms usually start to present themselves after the age of 50. Many patients with shoulder arthritis have pain and stiffness. A majority of the time the stiffness occurs in the morning and motion will improve throughout the day. Pain is usually a dull ache in the back or front of the shoulder. Sometimes there is catching or popping associated with motion. Pain is sometimes worse at night, especially when first lying down. Patients also notice loss of strength and function of

the shoulder.

X-rays are usually adequate in diagnosing shoulder arthritis. They reveal loss of the normal joint space or osteophytes (bone spurs). Sometimes magnetic resonance imaging (MRI) is performed to determine the status of the rotator cuff or other soft-tissue structures.

Nonsurgical treatment is usually tried first. Anti-inflammatories are good at relieving pain by decreasing the inflammation within the shoulder joint. Sometimes a cortisone shot is given. Cortisone is a steroid which acts locally in the joint to decrease the inflammation. Cortisone shots should be given every four to six months.

Physical therapy is important for maintaining and improving shoulder motion as well as strength and function. Many of the exercises done in therapy can easily be done at home with a well-designed home exercise program.

The goal of surgical treatment is to improve pain. If the arthritis is mild, a simple shoulder arthroscopy may be performed. Removal of bone spurs and loose bodies can be done arthroscopically and the down-time is usually minimal.

However, if the arthritis is severe, then shoulder replacement may be necessary. For this procedure, the arthritic joint is replaced with metal and plastic components similar to hip and knee replacements. There have been some major advances in shoulder replacement surgery over the past decade, leading to better outcomes.

Shoulder replacement surgery is technically demanding. If you're suffering from shoulder pain, it's a good idea to talk with an orthopedic specialist to discuss your options.

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