Integrative treatment of “Frozen Shoulder”

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“Frozen shoulder” as we used to call, clinically refers to “adhesive capsulitis”, that the connective tissue surrounding the shoulder joint becomes inflamed and stiffened, grows together with the other abnormal bands of tissue (called “adhesion”), causing the chronic pain, tenderness, and restricted movement of shoulder. The other clinical features could be swelling or numbness at the affected area, the pain worsen at night, aggravated by certain movements of shoulder or the weather turns colder. It is most commonly occurred at the middle-aged people due to the overuse of shoulder joint for years, and is thought in some cases to be caused by injury or trauma to the area. However, it may appear for no apparent reason. This chronic inflammation can last from 6 months to 3 years or more.

In TCM theory, it is believed that middle-aged people undergo a decline of body functions, lack of Qi-energy, “Liver-Kidney” dual deficiency, which are considered as the internal factors of pathogenesis, and would be vulnerably attacked by the pathogenic factors. In addition, suffering from the invasion of “pathogenic wind-cold-damp” would lead to the imbalance of body system and results in the Qi-stagnation and blood stasis. The pain and tenderness found consequently at the affected joints or entire body once these factors appear simultaneously.

Treatment of this disorder aims to restore joint movement and reduce the shoulder pain, generally can be administered by using nonsteroidal anti-inflammatory drugs (NSAIDs), muscle relaxants, or a short course of oral corticosteroids, but long-term use of corticosteroids is not recommended. For more severe cases, it often involves one or a series of steroid injections (up to six) such as Methylprednisolone. Treatment may be needed for several months. If these measures are unsuccessful, the doctor may recommend manipulation of the shoulder under general anesthesia to break up the adhesions, includes surgical procedure if necessary.

Over the past few years during my clinical practice, there were couple of patients seeking the TCM therapies for their suffering. Many of them had received a satisfactory effect after applying the treatments. Based on my successful evidence of treatment, I personally conclude that taking an integrated approach is more effective than single way of treatment, particularly for those clinical cases of chronic and complicate appearances.

For treating the “frozen shoulder”, there are some therapies recommended to have as follows:

- **Acupuncture and Moxibustion therapy** — appropriate acupoints surrounding the affected shoulder can be selected such as Jianyu, Jianliao, Jianzheng and other relevant points according to the route of meridian such as Tiaokou, Chizhe, Waiguan. Acupuncture is essentially painless. Although some people may experience a slight pinch as the needle is inserted, many feel nothing at all. Once inserted, the needles remain in place for approximately 20-30 minutes. Because modern acupuncture needles are sterilized and disposable, there is no risk of transmitting infections from one person to another. Electrical stimulation could be applied for some cases. TDP infra-red heater could be taken as an option in stead of burning moxa. You may be required to have up to 10 or 15 sessions of treatment accordingly.
Chinese herbal medicine --- Select huo-xue-hua-yu drugs (Blood proprietary), shu-jin-huo-luo drugs (muscle relaxants) or herbal supplements depending on the cause of pain. For those who do not respond to conventional treatment or unwilling to take analgesics or steroidal medication for a long term, this natural source of medicine seems as an alternative way of treatment.

Cupping therapy — This traditional therapeutic method has been commonly used to treat wind-dampness syndrome, obstructive syndrome, numbness of the limbs, muscle strain and acute sprain.

Tuina- massage — One of the chinese ancient chiropractic therapy, widely used for treating traumatological problems or orthopedic diseases.

Functional exercise — These exercises are important. Patients are encouraged to move their shoulder active and proper in order to alleviating the adhesion of shoulder, relieving the stiffness and pain. You may practice simply by these ways:

First, Bend forward, make your shoulders and arms relax, swing both your arms freely from side to side, forth and back, and rotate in circle for several times.

Second, Lean close to a table, put your both arms at the table’s edge, by squatting down and up repeatedly, stretching the shoulders passively at the same time.

Third, Crawling fingers on the wall: Stand before the wall and put your affected-side arm on the wall surface, move the fingers inch by inch like crawling up to the wall, until you feel pain at the shoulder, draw a mark at the stage your finger points. Practice once or twice daily, and try to move higher than previous mark each time regardless of the pain, and you will get to know how much improvement you gain.

Besides, remind yourself always to stretch your arms and shoulders gently in all directions like extension, flexion, rotation, abduction. Because pain discourages movement, further development of adhesion will occur unless the joint continues to move. You may start from minor range and increase gradually to larger motion. With treatments recommended and through self-care efforts, most people with frozen shoulder eventually regain nearly full shoulder range of motion and strength as signs and symptoms improve.

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