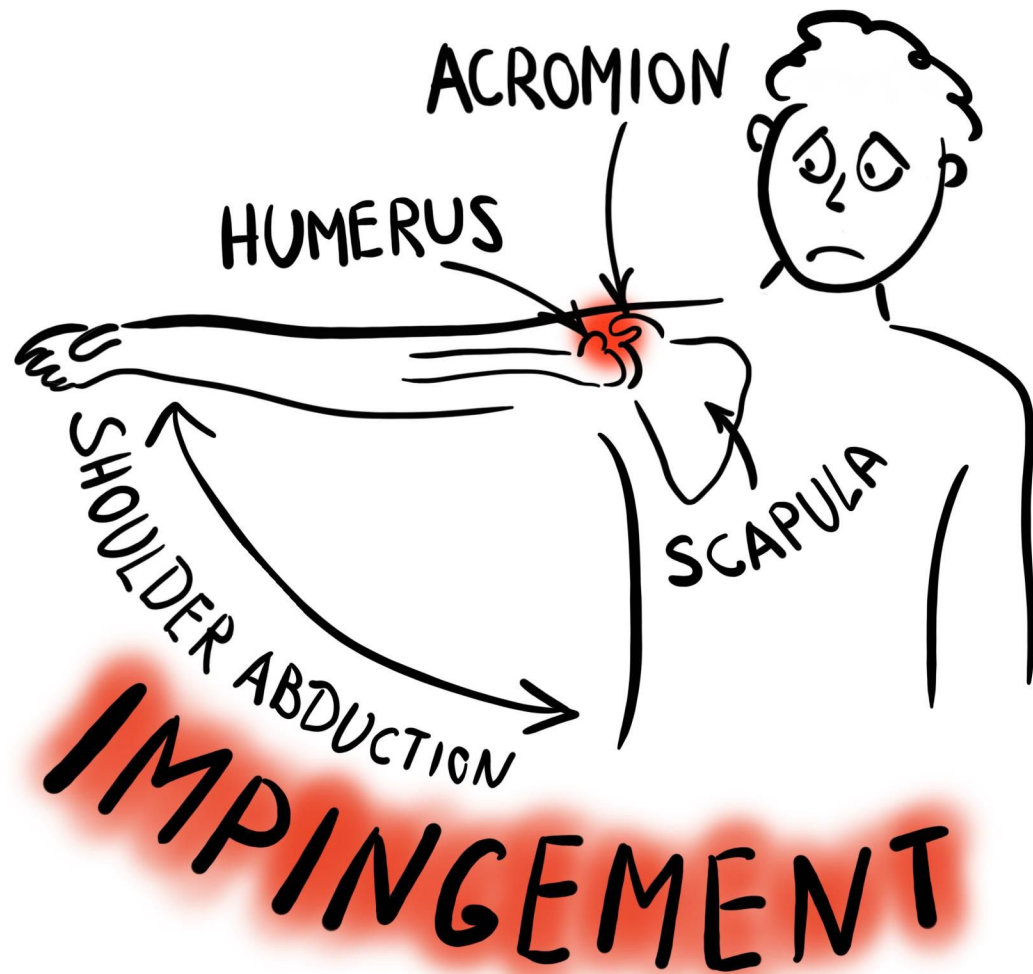
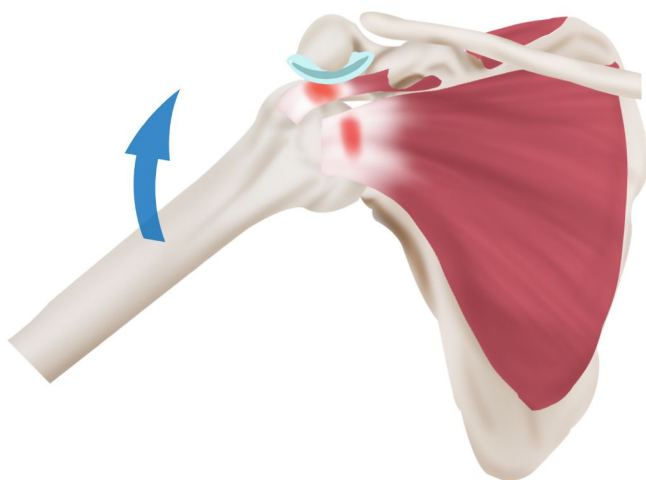
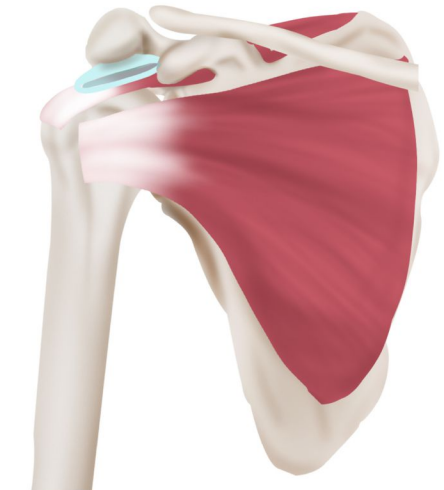
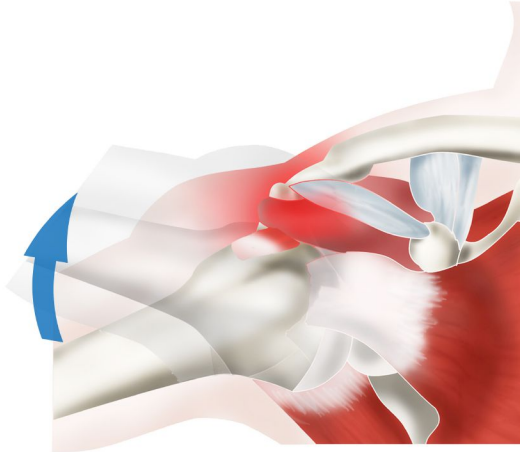
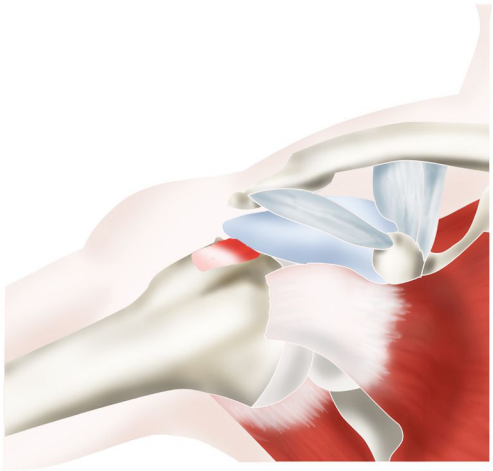


Shoulder
impingement



The theory is that as the arm abducts the supraspinatus tendon & the subacromial bursa are impinged* between the humeral head & the acromion

*impinge = strike

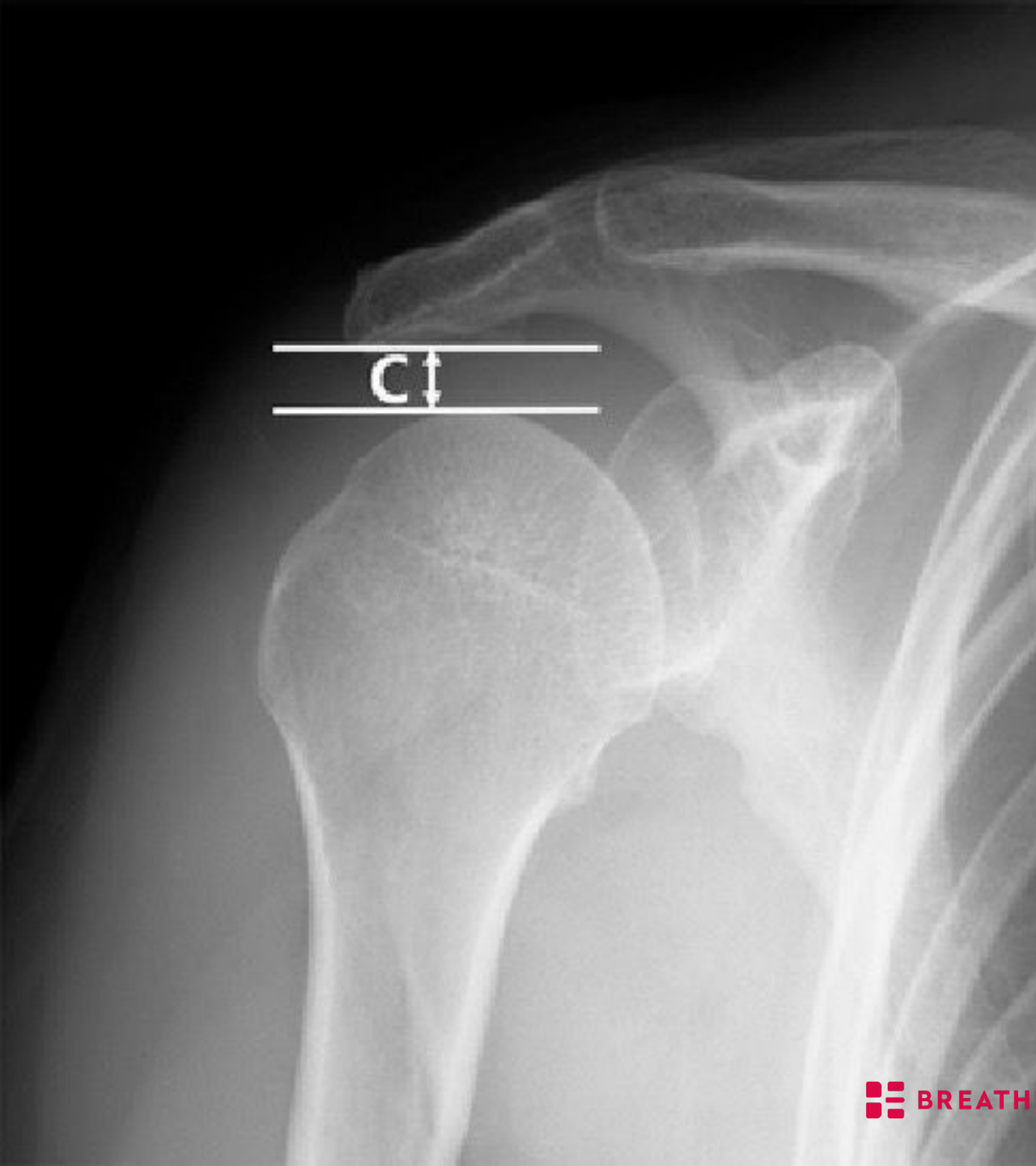


Possible diagnoses associated with shoulder impingement

- Rotator cuff tear
- Rotator cuff tendinitis / tendinosis / tendinopathy
- Subacromial bursitis / bursopathy



What is the
evidence on
shoulder
impingement?



Acromiohumeral distance

Distance between the acromion &
the humeral head

Acromiohumeral distance

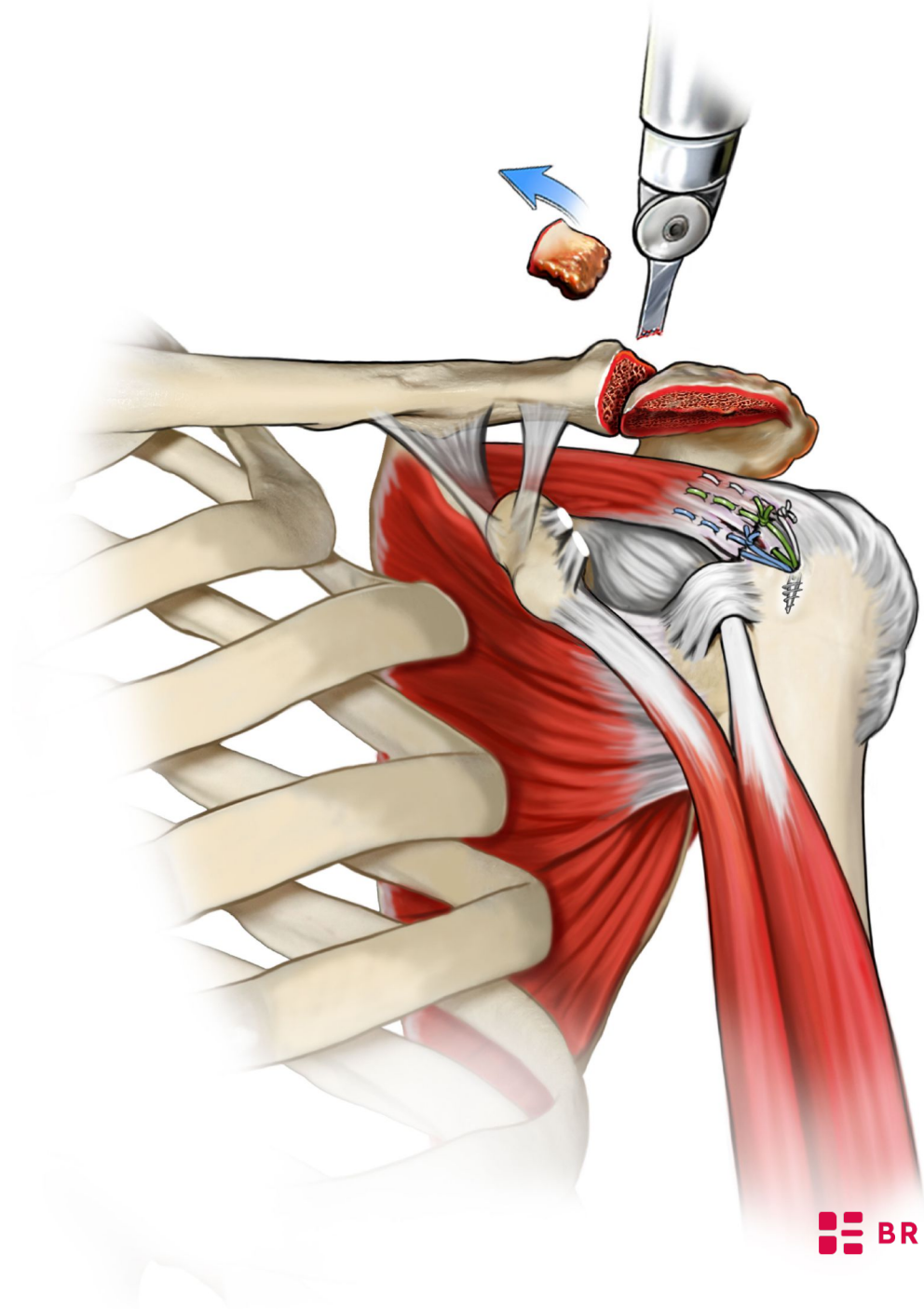
Shoulder pain



It turns out there is

No relationship
between
acromiohumeral
distance & pain

Park, S. W., Chen, Y. T., Thompson, L., Kjoenoe, A., Juul-Kristensen, B., Cavalheri, V., & McKenna, L (2020). No relationship between the acromiohumeral distance and pain in adults with subacromial pain syndrome: a systematic review and meta-analysis. Scientific Reports, 10(1), 1-14. <https://be-research-papers.s3.amazonaws.com/Diploma%20lecture%20research%20papers/Lecture%2025%20Shoulder%20pathology%20pt%201/Park-2020-No%20relationship%20between%20the%20acromioh.pdf>



Subacromial decompression

Aka acromioplasty

Surgery to remove the end of the acromion to increase the acromiohumeral distance to relieve impingement



Subacromial
decompression
is **exactly** as
effective as
placebo

Blom, A. W., Donovan, R. L., Beswick, A. D., Whitehouse, M. R., & Kunutsor, S. K. (2021). Common elective orthopaedic procedures and their clinical effectiveness: umbrella review of level 1 evidence. BMJ. <https://be-research-papers.s3.amazonaws.com/Diploma%20lecture%20research%20papers/Lecture%2025%20Shoulder%20pathology%20pt%201/Blom-2021-Common%20elective%20orthopaedic%20procedur.pdf>

Comments from shoulder researchers

Shoulder pain has traditionally been understood from a structural perspective; i.e. the cause of pain is impingement of tissues under the acromion.

The findings from the 2018 Lancet trial challenge this dogma as placebo surgery gave the same benefit as actual surgery.

This means that 'impingement' does not adequately explain 'subacromial' pain and hence is not a valid diagnosis.

“Stop using the term
impingement”

Littlewood, C., Bury, J., O'Shea, A., McCreesh, K., & O'Sullivan, K. (2018). How should clinicians integrate the findings of The Lancet's 2018 placebo-controlled subacromial decompression trial into clinical practice? In: BMJ Publishing Group Ltd and British Association of Sport and Exercise Medicine. <https://be-research-papers.s3.amazonaws.com/Shoulder/Littlewood-2018.pdf>



“Stop using the term impingement”

Littlewood, C., Bury, J., O'Shea, A., McCreesh, K., & O'Sullivan, K. (2018). How should clinicians integrate the findings of The Lancet's 2018 placebo-controlled subacromial decompression trial into clinical practice? In: BMJ Publishing Group Ltd and British Association of Sport and Exercise Medicine. <https://be-research-papers.s3.amazonaws.com/Shoulder/Littlewood-2018.pdf>





Self-test

- What is shoulder impingement?
- What are the potential diagnoses associated with shoulder impingement?
- What is the relationship between acromiohumeral distance and shoulder pain?
- How effective is subacromial decompression surgery?
- What do researchers recommend clinicians do about shoulder impingement?



So what is the
correct diagnosis
for shoulder
pain?



SHITS =

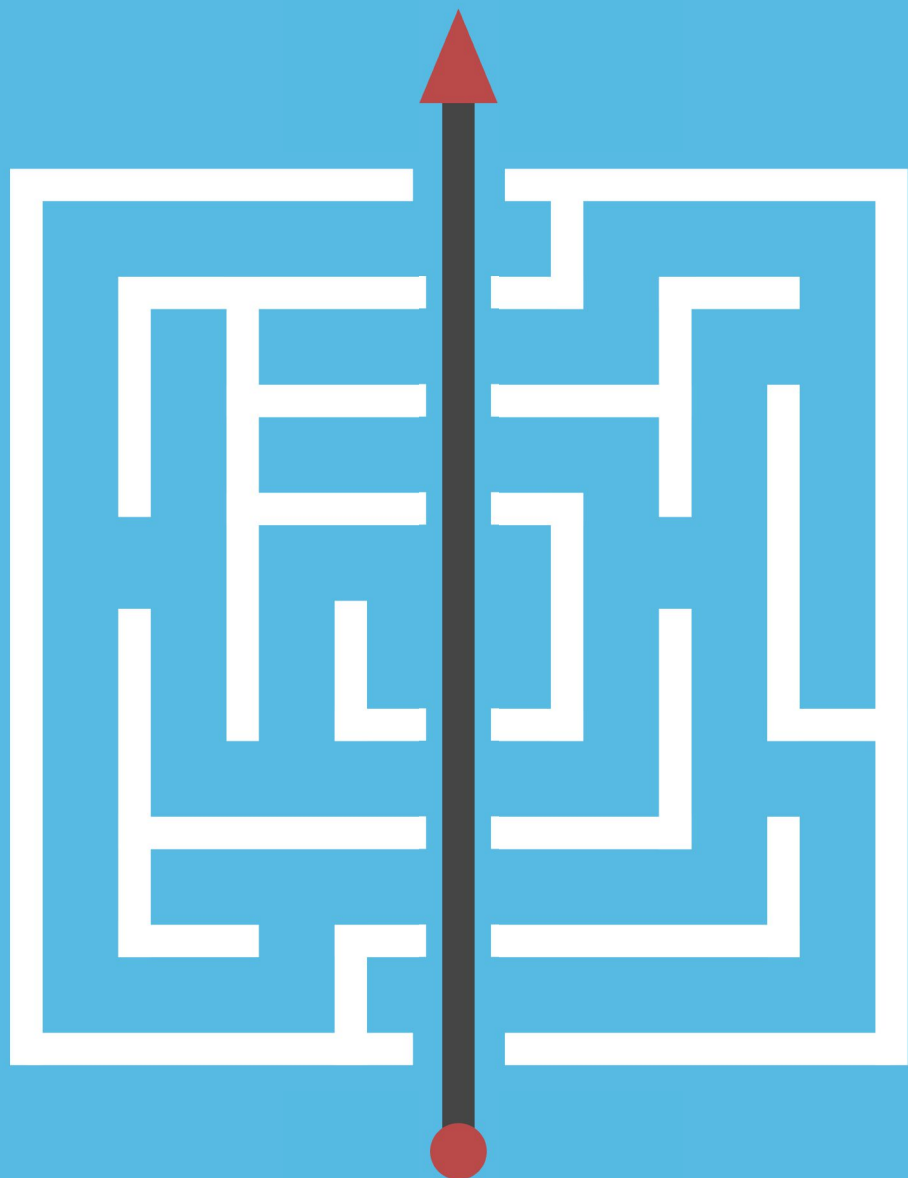
Something hurts
in the shoulder

*Coined by Adam Meakins

<https://www.thesportsphysio/blogs/>



And what is the
best exercise
program when
something hurts
in the shoulder?



KISS = Keep it
simple &
straightforward



SEX =
Strengthening
exercise