

# Bodies in Motion

TOTAL HEALTH CENTER NEWS LETTER

**“Expert Care with Caring Hands”**

Volume VI

Total Health Center is a full service physical/occupational therapy clinic where expert patient care is our first priority. We treat a full range of orthopedic and neurologic conditions. Our clinic has therapists with advanced training and specialist certifications. Our goal is to help you, the patient, reach your full potential.



Call us at (269) 968-0888  
Mon to Thurs 7am-7pm  
Fridays 7am-4pm

## Physical Therapy Management of Adhesive Capsulitis

Adhesive capsulitis is a very painful shoulder condition in which there is inflammation of the shoulder's joint capsule leading to formation of adhesions and limited movement. There is not wide spread agreement on the cause of adhesive capsulitis but it can be due to trauma, immobilization, or some other inciting event and this is called secondary adhesive capsulitis. With primary adhesive capsulitis the onset is insidious. Some believe that abnormal growth factor proliferates scarring/capsular inflammation. Other factors are thought to predispose a person to this condition including cervical spine disorders, autoimmune disorders, tendinitis, hypothyroidism, diabetes, hormonal disorders, and poor posture.

Regardless of the reason for onset, it is more common in females than males and often occurs in the age range from 40-60 years old. It is more common in diabetics with a 10-35% incidence as compared to 2% in the general population. Bilateral involvement is seen in about 12% of the population but the non-dominant arm is most typically affected.

Patients usually present with significant functional limitations including the inability to reach up, out to the side or behind their back. In the early stages people often have difficulty sleeping and due to pain hold their arm in a sling position across their body. It can become difficult to wash their hair or reach across the body to wash. Basic functions such as putting a shirt or jacket on can become difficult.

There are three classical stages of adhesive capsulitis and they include:

1. The early painful stage (freezing) 0-9 months- Patients have diffuse pain and difficulty with sleeping on the affected side. Patients begin to have movement restrictions secondary to pain.
2. The stiffening stage (frozen) 4-12 months- Progressive loss of ROM and decreased function are common.
3. Recovery stage (thawing) 5-24 months- Gradual increases in ROM and decreased pain.

Without treatment there is some natural resolution of adhesive capsulitis but time frames vary from 12-36 months. Twenty to 60% of people will have some limitation in ROM and residual pain for up to 10 years if not treated and full ROM may never be achieved.

Physical therapy has been shown to be beneficial in the treatment of adhesive capsulitis with exercise and mobilization being the most effective treatments. Exercise has been shown to be more effective than anti-inflammatory drugs or steroid injections. In the acute inflammatory stage, iontophoresis may be helpful as well. In addition to exercises done in the clinic, home stretching/exercise is a must.

With physical therapy, many patients can recover fully. If therapy is not successful, manipulation under anesthesia is often performed. Despite reported complications of dislocation, fracture, brachial plexus injury, rotator cuff tearing, and failure to regain ROM



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## Healthy Recipe of the Month

### Poached Chicken Salad Stackup

1 lemon  
1 lb. skinless, boneless chicken breast halves, cut in 2- inch pieces  
1 cup chicken broth  
4 cloves of garlic, minced  
1 seedless cucumber  
1 5 oz. container Greek-style honey flavored yogurt  
4 tomatoes, sliced  
Fresh oregano

Finely shred peel from lemon; juice lemon. In saucepan combine peel, juice, chicken, broth, garlic, and 1 tsp. dried oregano; bring to simmer over medium-high heat. Reduce heat and simmer, covered, 10 min or until no pink remains in the chicken. Drain, reserving 1/3 cup cooking liquid.

Meanwhile, chop half the cucumber; slice remaining. For dressing, place reserved cooking liquid in bowl; whisk in yogurt. Remove half the dressing and set aside. Add chicken to bowl along with chopped cucumber; toss to coat.

Layer tomato and slice cucumber on plates. Top with chicken mixture. Drizzle with some of the

secondary to pain, manipulation under anesthesia remains a proven treatment technique with a low incidence of the above complications. After manipulation techniques, patients resume physical therapy to maintain the increases in ROM.

Although adhesive capsulitis can be a disabling condition, it is treatable with proper care by a team of physicians, physical therapists and most importantly compliance of the patient.

## Exercise of the Month

### Wand ROM- flexion stretch lying on back

Lie on your back holding a bar. Raise your arms overhead. Stretch as far as you are able and hold the stretch for 10 seconds. Repeat 15 times. This stretch helps to regain overhead reach.



reserved dressing. Season with salt and pepper. Top with fresh oregano. Pass remaining dressing.

Serves 4

Each serving 196 cal. 3g fat, 68 mg cholesterol, 480 mg sodium, 13 g carbs, 3 g fiber, 32 g protein.

## Patient Testimonials

Second time around and services were even greater. I will miss the wonderful folks. They got me up and my knee is working beautifully.  
Annette

Thank you for being so understanding with my underlying medical condition and being flexible. Rhonda

Thank you for working with me and helping so much. Paulette