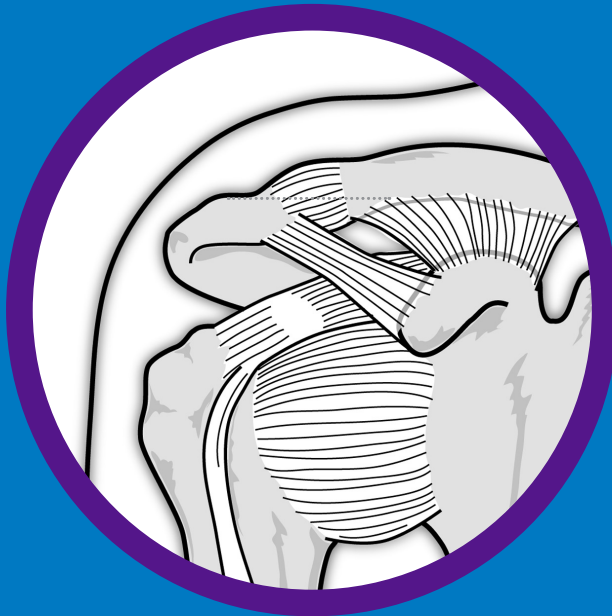




## Stiff Shoulder and Hydrodilatation Injection Management



### Physiotherapy appointment

Day ..... Date ..... Time .....

Physiotherapist's name .....

Location .....

Date of injection ..... Time of injection .....

**This leaflet has been produced to help you gain the maximum benefit from the shoulder injection you have been referred for. It should be used together with the treatment prescribed by your clinicians as there may be some small but necessary variations in your treatment.**

You have been referred for a shoulder injection to help restore your movement and reduce your shoulder pain. The following information has been put together to help you understand what happens before, during and after your injection.

## Information about the procedure

A shoulder becomes stiff when soft tissue around the joint becomes thickened, tight and short. This can make the shoulder painful and difficult to move. To help restore the movement of your shoulder an injection alongside physiotherapy can be helpful in certain cases.

## Hydrodilatation injection (sometimes called hydrodistention)

Saline, a local anaesthetic and a steroid are injected into the stiff shoulder joint; this allows the tight tissue to stretch and move more freely.

An x-ray or an ultrasound is used to check that the fluid is injected into the correct place.

## ● Important Information

Once you receive the date for your injection please ring the Physiotherapy Booking line to arrange an appointment for physiotherapy after the injection. Ring 01274 365277 and inform them that you are having a hydrodilatation injection.

## ● Common problems after the injection

**Pain:** This may last up to two weeks. Following the injection you can take your usual pain relief or seek advice from a pharmacist.

**Swelling:** You can use an ice to help control the swelling and inflammation.

### **Follow these steps up to 3 times a day:**

1. Wrap the ice in a damp towel.
2. Place the ice in the damp towel over the injected shoulder.
3. Leave over the shoulder for about ten minutes or until the skin is pink.
4. **DO NOT** use for longer periods and **DO NOT** place ice onto unprotected skin - ice can **BURN**.

**Stiffness:** You should be able to move your arm and shoulder more freely following the injection but occasionally the shoulder may feel stiffer. It is important to start moving your shoulder immediately and use the arm for normal activities such as washing, eating and getting dressed.

**Exercises can start immediately, once you have had the injection, you do not need to wait until you have seen your physiotherapist**

Perform the accompanying exercises 2 or 3 times a day to prevent stiffness and gradually increase the range of movement at your shoulder

**Leaving the hospital after your injection:** You will be able to go home immediately following the injection.

**Driving:** You will be unsafe to drive home on the day of the injection.

**Important:** Complications are very rare following this type of injection. There is a small risk of experiencing an allergic reaction to the injection. You will be asked to stay in the radiology department for up to 20 minutes after the injection to make sure you feel well enough to leave. There is also a risk of infection following an injection. If you experience redness or heat to the shoulder and feel unwell with a fever then please contact your GP.

**Working:** Once your pain has settled from the injection (usually 2-3 days) and you have enough movement at your shoulder to perform your job safely you can return. If you have any specific questions regarding returning to work then please ask your radiologist or physiotherapist.

## Exercise programme

It is important to maximise the amount of shoulder movement you have gained from the injection by following these simple exercises.

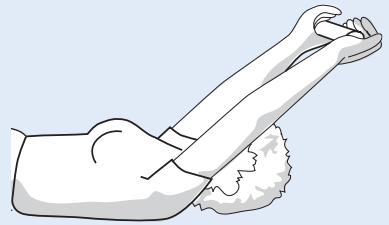
Carry out the following exercises slowly and in a comfortable range.

### **Stick lift**

Lie on your back, grip a stick with both hands

Start with the stick resting on your stomach

Grip the stick with both hands and slowly lift the stick upwards, progressing over your head if able.



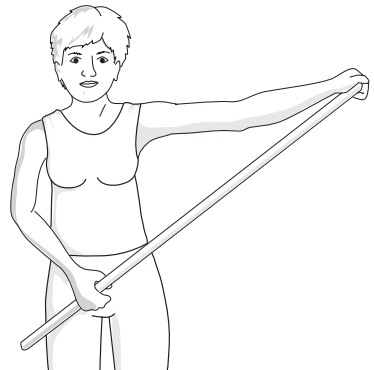
**Repeat 10 times**

### **Stick lift 2**

Stand and grip one end of a stick with the injected arm

Push the injected arm out sideways with the non-injected arm

**Repeat 10 times**

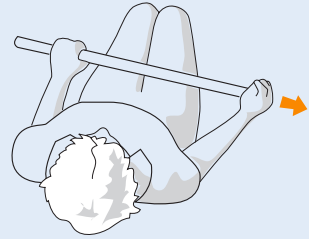


### Stick lift 3

Lie on your back with your elbows against your body and at a right angle

Hold the stick in your hands

Move the stick sideways so pushing the injected arm outwards

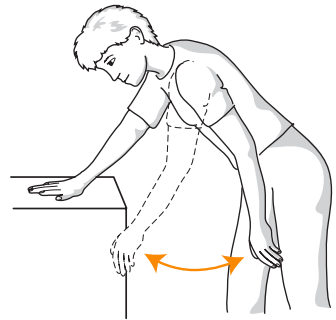


**Repeat 10 times**

### Arm Swing

Stand with your non-injected arm leaning on a table

Let your injected arm hang relaxed and allow the arm to swing backwards and forwards

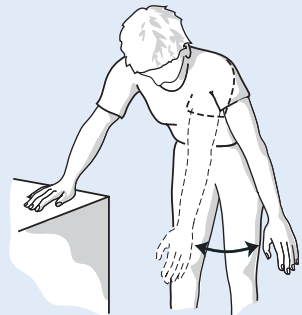


**Repeat 10 times**

### Arm Swing to sides

Stand with your non-injected arm leaning on a table

Let your other arm hang relaxed and allow the arm to swing from side-to-side



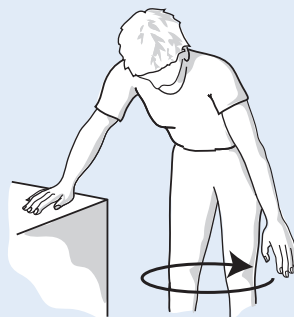
**Repeat 10 times**

## Arm Circles

Stand with your non-injected arm leaning on a table

Let your arm hang relaxed and allow the arm to swing in a circle clockwise and anti-clockwise

**Repeat 10 times**



**○ For further information please contact**

**01274 383162** – Physiotherapy Bradford Royal Infirmary (BRI)

Monday – Friday 8.00am to 4.30pm

**01274 365277** – Physiotherapy St. Luke's Hospital

Tuesday – Thursday 8.00am to 5.30pm

(Monday and Friday 8am-4pm)

You can contact us using the Relay UK app. Textphone users will need to dial 18001 ahead of the number to be contacted.

If you need this information in another format or language, please ask a member of staff to arrange this for you

## **Smoking**

Bradford Teaching Hospitals NHS Foundation Trust is a smoke-free organisation. You are not permitted to smoke or use e-cigarettes in any of the hospital buildings or grounds.

