

Shoulder Distension Procedure

What is Shoulder Distension?

Shoulder distension is a procedure in which a needle is inserted into the shoulder joint under X-ray or ultrasound guidance. The joint is injected with local anaesthetic and corticosteroid. Filtered air or saline water is then injected into the joint with the aim of stretching and releasing the joint capsule.

Why would I need this procedure?

You have been given a diagnosis of 'Frozen Shoulder'. Frozen Shoulder (also known as adhesive capsulitis) is a condition that causes pain and stiffness in the shoulder. We don't know why it happens. It usually affects people between the ages of 40 and 60. It is more common in people with diabetes.

The ball and socket joint in the shoulder is surrounded by a capsule made of soft tissue. The capsule is normally quite loose and elastic. In frozen shoulder the capsule becomes inflamed and thickened. This leads to restriction in movement and often severe pain. The pain is usually worse around the shoulder and upper arm. It can sometimes spread as far as the hand. The stiffness restricts reaching overhead and behind the back.

What are the alternative treatments?

You can opt to have no treatment. In most cases, the frozen shoulder symptoms will eventually ease naturally over 1-2 years, although a minority of people will have long term stiffness. You may have a steroid injection without distension. This may improve pain by reducing inflammation associated with the condition.

There are two surgical treatments that can be used for frozen shoulder, 'manipulation under anaesthetic' or 'arthroscopic capsular release':

Manipulation under anaesthetic involves strong, controlled stretching of the shoulder joint while you are under anaesthetic.

Arthroscopic Capsular Release is a keyhole surgery procedure done under general anaesthetic in which the shoulder capsule is divided to loosen the joint.

What are the potential risks and side effects?

- As with any procedure involving a joint injection, there is a very small risk of infection: if the area around the injection site becomes painful, swollen, red, weeping or hot or if you develop a temperature, you should contact your GP or hospital immediately.
- Occasionally people notice a flare-up in their joint pain for 1 or 2 days following the procedure.
- Although extremely rare, it is possible that you could have an allergic reaction to the medications used in the procedure. You will be asked about any allergies before the procedure. Allergic reactions will usually occur quickly after a procedure which is why you are asked to remain in the hospital for 30 minutes post injection. If symptoms are felt after you leave hospital you should call 999. Symptoms to be aware of include sudden rash, swelling of the eyes, face and throat, difficulty in breathing.

- Diabetic patients may notice a temporary change in blood sugar levels. If present, these should settle back down within a few days. It is advisable that you monitor your blood sugar levels with increased regularity until are normal again. If you are concerned discuss with your GP.
- Other side effects include facial flushing, and occasional menstrual irregularity in females.
- It is possible that the distension may not improve your symptoms.

Are there times that I should not have this injection?

You should not have the injection if you

- Are pregnant or breastfeeding;
- Have had a reaction previously to steroids or local anaesthetics;
- Have a skin infection near the injection site;
- Feel unwell;
- Do not want the injection;

If you are on anticoagulation therapy (blood thinning), we may need to discuss this with your GP whether you should have the injection.

What are the expected benefits of treatment?

Reduction of shoulder pain and improved shoulder movement.

Where will the procedure take place?

Bexhill Hospital, Conquest Hospital or Eastbourne District General Hospital.

Will I have an anaesthetic?

You will have a local anaesthetic injected into your shoulder during the procedure.

How will I feel afterwards?

You may have some discomfort in the days following the procedure. It is important to control the pain as far as possible to allow you to exercise and stretch your shoulder effectively. You can continue to use any medication that you were using to control your pain before the procedure. Speak to a pharmacist or your GP if you need more advice regarding pain relief.

How long will I be in hospital?

The procedure will take approximately 45 min. You can leave the department 30 minutes after the procedure if you feel well. Occasionally we may be able to provide post injection physiotherapy on the day to go through your exercises therefore you are advised to allow 2 hours for this procedure.

Can I drive after the procedure?

We recommend that you do not drive for 24 hours after the procedure

What should I do when I go home?

There are no restrictions to movements in any direction. Do not be afraid to start moving the arm as much as you can. To get full benefit from the procedure it is important to regularly stretch the shoulder to maintain the improvement in movement.

The following stretches should be done at least 3 times daily for at least 1 month, however taking the arm through full range frequently throughout the day is likely to be helpful. If your movement is still improving after 1 month continue exercising until no further improvement is achieved.



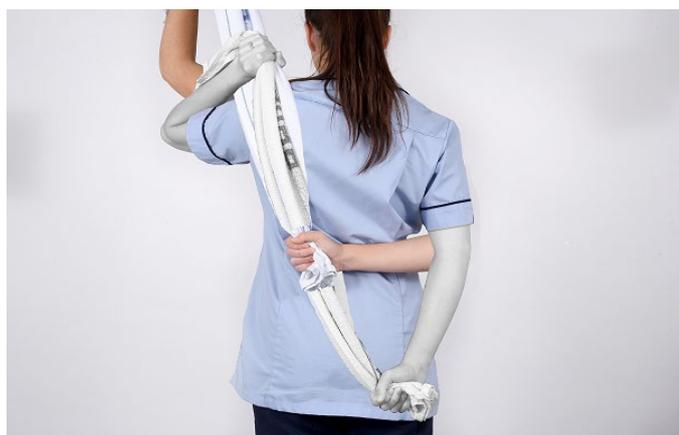
Hold a stick in both hands. Push the hand to be exercised out to the side, keeping elbow close to body. Hold 20 seconds. Repeat 6 times. Gently rocking into the stiffness may help regain movement.



Lift arm overhead helping with other hand. Hold 20 seconds and try to increase range of movement. Repeat 6 times.



All fours on bed/floor. Keep hands still and rock back until you feel a stretch in your shoulder. Hold 20 seconds and try to increase. Repeat 6 times



Use a towel to pull up the affected arm behind back. Hold 20 seconds and try to increase. Repeat 6 times.

You may use a heat or ice pack on the shoulder to relieve any shoulder pain following exercise. Wrap the pack in a damp towel. Remove after 10-15 minutes. You can apply every two hours as required. Remove the ice/heat if you experience excessive discomfort. Keep checking the condition of the skin underneath the ice/heat pack to ensure the skin is not being damaged. If your skin is frail or you have altered sensation of the shoulder please do not use heat or ice.

How soon will I be able to resume normal activities?

There is no limitation to movement after the procedure and you should move your shoulder as much as possible.

Will I have to come back to hospital?

Not routinely. You may be referred for physiotherapy to check on your exercises. If your pain has not improved following the procedure, you should contact the clinician who referred you for the distension.

When can I return to work?

You can return to work as soon as you feel able to.

Can I drive home after this procedure?

You are advised not to drive following this procedure for a minimum of 12 hours. This is due to the local anaesthetic impairing your senses for a period of time.

Consent

Although you consent for this treatment, you may at any time after that withdraw such consent. Please discuss this with your medical team.

Important information

The information in this leaflet is for guidance purposes only and is not provided to replace professional clinical advice from a qualified practitioner.

Sources of information

- <http://www.arthritisresearchuk.org/system/search-results.aspx?keywords=steroid+injection>
- <https://www.shoulderdoc.co.uk/>

Saunders S and Longworth S (2006). Injection techniques in Orthopaedic Medicine (3rdEd) Churchill Livingstone, Edinburgh.

Your comments

We are always interested to hear your views about our leaflets. If you have any comments, please contact the Patient Experience Team – Tel: 0300 131 4731 (direct dial) or by email at: esh-tr.patientexperience@nhs.net

Hand hygiene

The Trust is committed to maintaining a clean, safe environment. Hand hygiene is very important in controlling infection. Alcohol gel is widely available at the patient bedside for staff use and at the entrance of each clinical area for visitors to clean their hands before and after entering.

Other formats

If you require any of the Trust leaflets in alternative formats, such as large print or alternative languages, please contact the Equality and Human Rights Department.

Tel: 0300 131 4434 Email: esh-tr.AccessibleInformation@nhs.net

After reading this information are there any questions you would like to ask? Please list below and ask your nurse or doctor.

The following clinicians have been consulted and agreed this patient information:

Justin Harris Consultant Radiologist, Conquest Hospital
Martin Sambrook Consultant Radiologist, Eastbourne DGH
Vincent Gallagher Physiotherapist/Sonographer, Conquest Hospital

The directorate group that have agreed this patient information leaflet:

Next review date: November 2025
Responsible clinician/author: Matthew Picton Advanced Physiotherapy Practitioner

© East Sussex Healthcare NHS Trust – www.esht.nhs.uk