

SHOULDER PAIN

The diagnosis of the cause of shoulder pain can be made easier by taking into account certain principles:

The age and gender of the person experiencing the pain: certain types of shoulder pain and disorders occur with frequency in certain ages and genders – commonly these conditions should be considered in such a person. In other words, by looking at the list below one can take your age and sex and fit it in as the most commonly occurring shoulder problem for this group and possibly apply it to yourself; then look at where the pain is located (see below) and some other aspects and you may well come close to the condition you more than likely suffer from:

1. Young girls (14 to 20 years old) – consider [thoracic outlet syndrome](#).
Young athletic males participating in sport (14 to 21 years old) – consider shoulder instability due to previous dislocations.
There is often a previous injury where the shoulder was dislocated the first time.
2. Young active males and females (18 to 30 years old) – consider os-acromiale.
3. Males and females 40 years and older – [rotator cuff impingement syndrome](#)
4. Females 45 to 55 years old – could have frozen shoulder (adhesive capsulitis).
5. Females and males 40 to 60 years old – [consider calcific tendonitis](#).
6. Active sporting males with pain on top of the shoulder – consider acromio-clavicular pain.
7. Males and females 50 years and older – [consider rotator cuff tears](#).
8. Males and females 60 years and older – [consider osteoarthritis](#) of the shoulder.

The above information indicates commonly occurring conditions in certain gender and age groups. Additional factors that may help in making the diagnosis is the nature and localisation of the pain.

Localisation:

1. Pain on top of the shoulder: May be caused by acromio-clavicular (AC joint) problems
2. Pain in the shoulder and outside of the upper arm: Rotator cuff problems may have this pattern.
3. Pain at the back of the shoulder: Consider arthritis.
4. Pain in the neck and upper part of the shoulder: May be caused by referred problem from the neck.

5. Pain in the neck, shoulder and radiating down the arm into the hand: Consider neurological problems like disc problems in the neck or thoracic outlet syndrome.
6. Night pain: Pain at night occurs with most shoulder problems. Usually shoulder instability does not affect sleep but most other conditions do when a person lies down at night. The reason is that any inflammation is worse when the position of the structure is lower due to the pressure effect of gravity – in the upright position the shoulder is elevated.
7. Constant or intermittent pain: Most mechanical reasons for pain (e.g. rotator cuff tears) mostly cause pain with certain movements like lifting the arm. On the other hand certain conditions cause constant pain unrelated to movement – these would be pain from nerve conditions like referred from the neck or thoracic outlet syndrome.

Severity of the pain:

Acute “blinding” pain usually occurs with calcific tendonitis when the calcium is being absorbed. Other conditions may cause intermittent pain depending on position of the arm and the activity. If the pain is constant and running from the neck down to the shoulder and hand it is most likely from a nerve problem in the neck or [thoracic outlet](#). If the pain is more mechanical (occurring with movements only) it would suggest a damaged structure in the shoulder.