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Imaging diagnosis and intensive rehabilitation treatment of frozen shoulder

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Frozen shoulder (FS) is an insidious, painful condition that results in a gradual restriction of movements. The primary pathologic change in IAC is inflammation, and the fibrosis reaction is a secondary reaction, leading to thickening, contracture, and adherence of the capsule and synovia as well as the surrounding ligamentous structures. Many patients continue to have a significant long term painful restriction in their range of motion, although few are functionally restricted. The normal course of FS has been described as having 4 stages: preadhesive, freezing, frozen, and thawing. The diagnosis of FS is based on a thorough history taking and physical examination. Radiographs of the shoulder are usually negative. Imaging studies including arthrography, ultrasonography, and magnetic resonance imaging can be used to rule out concomitant conditions that may affect the treatment and to confirm FS. The goals of treatment are to relieve pain, to restore restore function and motion of the shoulder, and improve quality of life. Treatments for FS range from conservative treatments including physical therapy, therapeutic exercise, joint mobilization and manipulation, nonsteroidal anti-inflammatory and opioid medications, intra-articular steroid and hyaluronic acid injections, suprascapular nerve block, glenohumeral distention arthrography with and without steroid supplementation, and manipulation under general anesthesia to surgical intervention. Clinically effective joint mobilization and manipulation improves tissue extensibility, reduces soft tissue swelling and inflammation, reduces pain, increases range of motion, and stimulates peripheral mechanoreceptors in FS. It is necessary to refine the selection of treatment for individual patients according to the phase of the disease.

Biography

Gi-Young Park graduated and got degree of MD, phd from Yonsei University College of Medicine (Seoul, Korea). He has been a head professor of Department of Rehabilitation Medicine in Daegu Catholic University Hospital since 2008. He published more than 100 papers in reputed journals and elected as the next president of Korean Academy of Neuromusculoskeletal Sonography. He have been teaching rehabilitation medicine and neuromusculoskeletal ultrasound since 1995 and has given many lectures and hands on instructions at courses organized by universities, academies, and societies in Korea, Taiwan, China, Japan, India, and Myanmar etc.

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