

Transcript of Video-Audio Clips with Dr. Robert Leb, Orthopedic doctor/surgeon, OSF HealthCare

Dr. Leb says people come to him reporting they were fine one day and then they lost range of motion in their shoulders.

“Lots of people tell me they felt like they slept on their shoulder wrong and then a few days later they’re like, ‘I can’t move it. I’m stuck.’ And then they come in to see us.” (:12)

Dr. Leb says there’s a strong connection to inflammation, which makes people more susceptible if they have certain conditions.

“So if you have diabetes, either Type 1 or Type 2, you’re at risk for frozen shoulder. If you have a history of cancer; cancer patients tend to develop inflammation, so patients who have had cancer are at higher risk for frozen shoulder.” (:17)

Over the counter anti-inflammatory medicine can help but sometimes more intervention is needed.

“The mother of all anti-inflammatory drugs are steroids, and I can either give that to you by mouth, so you can take pills, or I can actually inject it right into the shoulder and zap the inflammation that way.” (:15)

Physical therapy can help loosen the “frozen” connective tissue.

“The body shrinks it down, and then little by little, with the assistance of a qualified physical therapist or occupational therapist, you stretch that shoulder out and regain that motion.” (:13)

Dr. Leb says in a small number of cases, arthroscopic surgery might be needed to loosen the joint capsule.

“(That’s) where I put a little lighted telescope into the shoulder and I can actually use electrocautery and actually cut the tissues that are so scarred in and open the shoulder that way. Or, in rare cases, I’ll even make an incision and go down into the shoulder capsule and very carefully release it.” (:19)