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Dislocated Shoulder

WHAT MAKES UP THE SHOULDER JOINT?

The shoulder joint is typically thought of as a ball and socket joint. The "ball", or humeral head, rests on a very shallow "socket", or glenoid. This allows for extreme mobility of the shoulder. The socket is lined with a cartilage structure called the labrum, which deepens and helps stabilize the joint. Surrounding the joint is a flexible capsule that helps to stabilize the shoulder joint.



HOW DOES THE SHOULDER DISLOCATE?

Everybody has significant mobility of the shoulder, which allows for full shoulder range of motion, but this flexibility comes at a price with trauma or overuse. A <u>subluxation</u> means that the "ball" is partially out of the "socket". A <u>dislocation</u> means that the "ball" completely goes out of the "socket". The shoulder usually dislocates anteriorly, which means that the arm bone moves forward and out of socket. This most frequently occurs from a trauma such as a fall or a force moving against the arm. After a first dislocation, future shoulder instability may occur more frequently and with less traumatic activities.

WHAT ARE THE SYMPTOMS?

Following a subluxation or dislocation, the shoulder is quite painful. While the shoulder remains out of socket, some patients may describe some numbness and tingling that travels down the arm. When the shoulder is reduced (put back in the socket), the pain improves significantly. Many people still complain of soreness for a few weeks following the injury.

DO I NEED SURGERY?

Surgery is not necessary for the treatment of all shoulder dislocations. If the shoulder is currently dislocated, you should present to an orthopedic urgent care or emergency room to have the shoulder reduced. After the shoulder has been reduced, you are often placed in a sling to allow your shoulder to rest and heal for 2-3 weeks. A physical therapy program is then started to strengthen the surrounding musculature. A first time shoulder dislocation/subluxation is often treated with physical therapy though surgery may be discussed in younger and more active patients.

Occasionally, a shoulder dislocation can cause damage to the bones or capsule of the shoulder joint or the labral tissue. If your provider suspects damage to these structures, they may recommend other imaging studies and possibly surgery to repair the damage.



ARE THERE ANY ADVERSE OUTCOMES?

A shoulder dislocation can cause injury to some of the surrounding nerves. This can lead to numbness and weakness, which is typically temporary. As mentioned previously, after a first dislocation, patients are at a higher risk of future dislocations. Finally, surgical treatment has associated risks and can lead to stiffness of the shoulder.