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Shoulder Dislocation & Instability



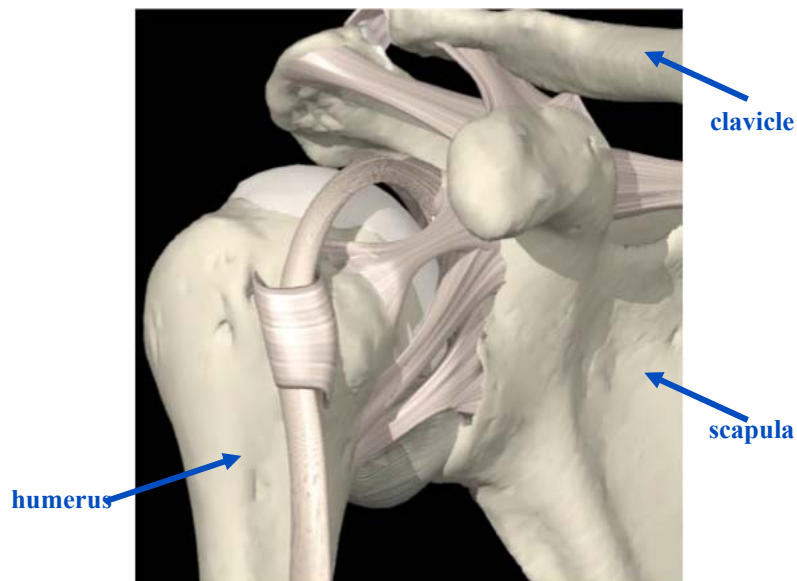
Understanding Your Child's Shoulder Dislocation and Instability

About the Shoulder

The shoulder joint is the most mobile joint in your body. As a ball-and-socket joint, it is able to move in many directions. This greater range of motion puts the shoulder at risk for dislocation.

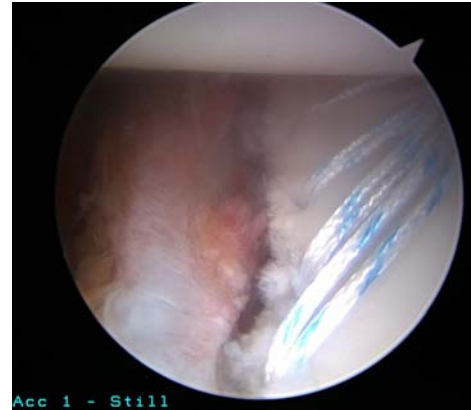
Anatomy

The head, or ball, of your humerus fits into a shallow socket in your shoulder blade called the glenoid fossa. The rim of the socket (labrum) and strong connective tissues (ligaments) stabilize and keep the head of the humerus centered in the glenoid fossa (socket). The muscles surrounding the shoulder are also very important for the stability of the joint.



How does a shoulder dislocation happen?

A shoulder dislocation occurs when the head of the humerus (upper arm bone) is forced out of the shoulder socket. Once a shoulder has dislocated, it is vulnerable to repeat dislocations. When the shoulder is loose and dislocates out of place repeatedly, it is called shoulder instability.



These pictures show what happens during surgery to fix a Bankart lesion in the shoulder. The blue and white "rope" you see is the special stitch and anchor that helps fix the damaged labrum.

What happens after surgery?

After surgery, your shoulder may be immobilized temporarily with a brace. Your surgeon will also prescribe formal physical therapy.

What should I expect in Physical Therapy?

Your physical therapist will teach you exercises to rehabilitate the shoulder. These will improve the range of motion in your shoulder and prevent scarring as the shoulder heals. Exercises to strengthen your shoulder will gradually be added as you progress through your plan of care. Although it is a slow process, your commitment to physical therapy is the most important factor in returning to all the activities you enjoy!

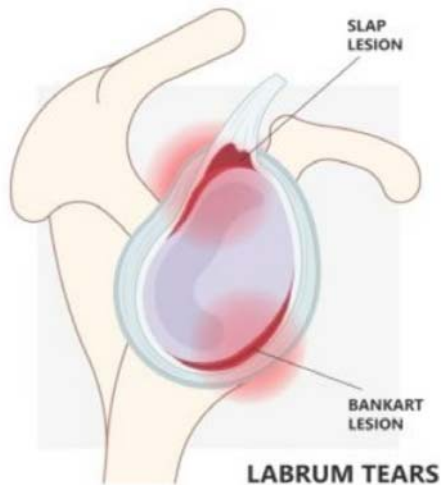
Surgical Treatment Options for Shoulder Dislocation and Instability

What happens if I need surgery?

Surgery is often necessary to repair torn labrum and ligaments so that they are better able to hold the shoulder joint in place.

What is Arthroscopy?

Soft tissues in the young shoulder can usually be repaired with arthroscopic or minimally invasive surgery using tiny instruments and small incisions. Your surgeon will look inside the shoulder with a tiny camera and perform the surgery with special pencil-thin instruments.



What are shoulder labral tears?

A shoulder labral tear happens when the soft cartilage (labrum) in your shoulder gets damaged. There are two common types of shoulder labrum tears:

- A **Bankart tear** specifically involves the front and lower part of the labrum, often resulting from shoulder dislocations
- A **SLAP tear**, on the other hand, occurs at the top of the labrum, extending from front to back, and is commonly associated with overhead or repetitive arm movements.

If you have a shoulder labrum tear, your provider can fix it with surgery. They use special stitches and small anchors to carefully attach the labrum (the cartilage) back to the bone.

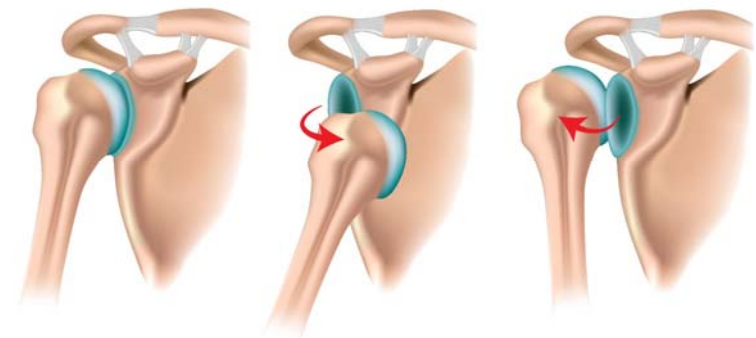
What can happen when a shoulder dislocates?

Sometimes, when you hurt your shoulder really badly, the ball part of your upper arm bone (called the humerus) can slip out of the shoulder socket. This can tear some important parts inside your shoulder, like the labrum (the rim of the socket) and the ligaments (the strong bands that hold everything in place).

If you dislocate your shoulder once, there's a big chance it could happen again—especially for young people. Your shoulder might be extra loose or flexible, which can make it easier for your shoulder to slip out of place. If it keeps happening, your shoulder might start to hurt a lot and even cause long-term problems, like pain or arthritis (where the joint becomes stiff and swollen).

It's really important to take care of your shoulder after a dislocation so it doesn't keep happening!

Shoulder Dislocation



Normal
anatomy

Anterior
dislocation

Posterior
dislocation

Non- Surgical Treatment Options for Shoulder Dislocation and Instability

What are some symptoms of shoulder instability?

Common symptoms of chronic shoulder instability include:

- Pain from an old shoulder injury
- Your shoulder popping out of place again and again
- The feeling that your shoulder might "give out" or not be strong
- A feeling like your shoulder is loose or slipping around

What should you expect at your office visit?

After discussing your symptoms and medical history, your healthcare provider will examine your shoulder. Specific tests help your healthcare provider assess instability in your shoulder. Your healthcare provider may also test for general looseness in your ligaments. For example, you may be asked to try to touch your thumb to the underside of your forearm.

Will my healthcare provider order additional tests?

Your healthcare provider may order imaging tests to help confirm the diagnosis and identify any other problems.

X-rays will show any injuries to the bones that make up your shoulder joint. A magnetic resonance arthrogram (MRA) provides detailed images of soft tissues to help identify injuries to the labrum and ligaments surrounding your shoulder joint.

How is a shoulder dislocation or instability treated?

Treatment options for shoulder instability include activity modification, anti-inflammatory medication, physical therapy, bracing and sometimes even surgery. Shoulder instability treatment is based on symptoms of instability and imaging tests. You and your healthcare provider will decide the best course of treatment to help you safely meet your activity and/or sports goals.

Activity Modification

This means making some simple changes to what you do each day and avoiding activities and/or sports that might make your shoulder hurt or dislocate.

Medication

Taking anti-inflammatory medicine or NSAIDS (non-steroidal anti-inflammatory drugs) such as ibuprofen (Advil or Motrin) or naproxen (Aleve) as directed by your healthcare provider may be helpful to decrease pain and swelling. This medication should be taken for 10 to 14 days to allow the medicine to build to therapeutic levels in the body.

Physical Therapy

Physical Therapy may be recommended for specific strengthening and stretching exercises, ice and other modalities, or treatments. When you strengthen shoulder muscles and work on shoulder control, you can increase stability.

Bracing

Braces are available to help prevent shoulder dislocations and are often worn during contact or collision sports.

