

Shoulder Dislocation and Subluxation

The shoulder is an inherently jiggly, unstable joint, due to the humeral head sitting within a shallow glenoid (socket). It needs this mobility to give us the freedom of movement that the shoulder allows. A shoulder dislocation is where the humerus (upper arm bone) comes out of the socket of the shoulder. Subluxation of the shoulder is when it starts to dislocate but then pops back into place.

The shoulder is the most frequently dislocated joint within the body, and can dislocate in three directions: anteriorly, posteriorly, or inferiorly. Shoulder dislocation is typically caused by an excessive external force, or rotation of the humerus. Symptoms of a shoulder dislocation and subluxation vary and can include pain, reduced or loss of arm movement, weakness, swelling, bruising, muscle spasm, altered sensation of the arm, and deformed appearance of the joint.

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Several risk factors for shoulder dislocation have been identified and include:

- Contact sports.
- Falls onto an outstretched arm.
- Motor vehicle accident.
- Hypermobility syndromes.
- Increased incidence after previous shoulder dislocation.

Diagnosis

Diagnosis of acute shoulder dislocations and subluxation can be achieved through clinical symptoms and description. Imaging may be warranted to assess possible damage to surrounding structures as the the humeral head slides out and then back in. Imaging to rule out possible fracture to the shoulder should always be undertaken prior to attempting to relocate the joint.

Management

Management of shoulder dislocation and subluxation is a multimodal approach and may include:



- A period of immobilisation in a sling.
- Education around the injury, management, time frame, return to function and sport (if applicable).
- Graded range of motion exercises, avoiding stress to the areas of the capsule that have been stretched.
- Manual therapy to help restore shoulder joint mechanics and relieve any secondary areas of soreness related to the injury such as stiff painful neck.
- Graded strength program to restore muscle strength, control and protection of the shoulder.
- Sports specific functional control exercises.

Most dislocations can be managed conservatively with good effect. Once the shoulder has dislocated once, some of the passive structures of the joint become lax, making a second dislocation more likely. For this reason, it is imperative to undertake a thorough rehab program to maximise muscle control around the joint. When conservative management fails to yield satisfactory improvement in function or in the case of multiple dislocations, a referral to an orthopaedic specialist for advice on surgical repair may be warranted.

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If you have had a shoulder dislocation or subluxation, book now with one of our experienced physiotherapists to create a plan to get you back In Balance and doing the things you love!