



Orthopaedic Surgery  
& Sports Medicine

## **Rotator cuff tendinitis**

### **Description**

Rotator cuff tendinitis is an inflammation (irritation and swelling) of the tendons and muscles of the shoulder. It is generally caused by overuse or overload. Rotator cuff tendinitis often occurs in sports that require the arm to be moved over the head repeatedly, such as pitching in baseball, lifting heavy weights over the shoulder, serving the ball in racket sports, and swimming freestyle, butterfly, or backstroke.

The rotator cuff consists of four very small muscles which help the arm attach and move properly in the shoulder socket. Chronic inflammation due to repetitive movements or injury can cause the tendons of the rotator cuff to tear.

### **Common signs and symptoms**

- Pain around the shoulder, often at the outer portion of the upper arm.
- Pain that is worse with reaching overhead or lifting.
- A constant aching when not using the arm or pain that awakens you at night.
- Weakness with raising the arm above the head.
- Limited range of motion, especially trying to reach behind your back.

### **Causes**

- Strain from sudden increase in amount or intensity of activity.
- Incorrect swimming or throwing techniques, or over-training.
- Previous shoulder injury.
- Loose shoulder joint.
- Aging, degeneration of the tendon with normal use.

### **Risk of further injury**

- Contact sports such as football, weightlifting, and boxing
- Throwing sports such as baseball, tennis, or volleyball
- Heavy labor
- Poor physical conditioning (strength and flexibility)
- Aging

### **Initial treatment:**

Initial treatment consists of medications and ice to relieve pain; stretching and strengthening exercises of the shoulder (specifically the rotator cuff muscles); rest; and modification of the activity that initially caused the problem. These can all be carried out at home for acute cases, although referral to a physical therapist or athletic trainer for further evaluation and treatment may be recommended. An injection of cortisone to the area around the tendon (within the bursa)

may be recommended. Gradual return to activity is allowed after symptoms are resolved.

### **Medication**

Nonsteroidal anti-inflammatory medications such as aspirin and ibuprofen (do not take within 7 days before surgery), or other minor pain relievers such as acetaminophen, are often recommended. Take these as directed by your physician.

Contact your physician immediately if any bleeding, stomach upset, or signs of an allergic reaction occur. Topical ointments may be of benefit. Pain relievers may be prescribed as necessary by your physician. Use only as directed and only as much as you need.

### **Heat and cold**

- Cold is used to relieve pain and reduce inflammation for acute and chronic cases. Cold should be applied for 10 to 15 minutes every 2 to 3 hours for inflammation and pain and immediately after any activity that aggravates your symptoms. Use ice packs or an ice massage. Cold should be applied for the first 72 hours after initial injury.
- Heat may be used before performing stretching and strengthening activities prescribed by your physician, physical therapist, or athletic trainer. Use a heat pack or a warm soak. **Do not use** heat if inflammation (swelling) is present.