## Dynamic Chiropractic



MUSCULOSKELETAL PAIN

# **Shoulder Impingement Syndromes**

Charles Neer first established the concept of impingement in 1972. He described this condition as subacromial outlet obstruction resulting in irritation of the supraspinatus tendon.<sup>1</sup>

Shoulder Impingement Syndromes

- 1. primary impingement
- 2. secondary impingement
- 3. subcoracoid impingement
- 4. posterior-superior glenoid impingement
  - a. "internal glenoid impingement"

#### **Primary Impingement**

Etiologies of primary impingement:

- 1. subacromial spurring
- 2. subacromial fibrosis
- 3. acromioclavicular (AC) joint spurring
- 4. type II or III acromion
- 5. os acromiale

Neer Classification of Impingement

Type I: < 25 years of age, reversible, swelling, tendonitis, no tears, conservative treatment.

Type II: 25-40 years of age, permanent scarring, tendonitis, no tears, subacromial decompression (SAD).

Type III: > 40 years of age, small RTC tear, SAD with debridement/repair.

Type IV: > 40 years of age, large RTC tear, SAD with repair.

### Acromial Morphology

Type I Acromion: flat, minimal impingement.

Type II Acromion: curved, higher rate of impingement.

Type III Acromion: beaked, highest rate of impingement, may be degenerative or congenital.



**Characteristics of Primary Impingement** 

- 1. patients > 50 years of age
- 2. consequence of aging
- 3. mechanical compromise of the subacromial space
- 1. degenerative joint diseases of the AC joint
- 2. subacromial spurring
- 3. cuff atrophy
- 4. cuff or scapular weakness (poor posture)

#### Terminology

- 1. Neer referred to primary impingement as "outlet" impingement.
- 2. Dr. James Andrews calls it primary or external/subacromial impingement.

a. The superior or bursal side of the cuff is involved.

### Symptoms

- 1. pain with overhead activities
- 2. pain when sleeping on the affected shoulder

### 3. anterior or anterolateral pain

Characteristics of Secondary Impingement

- 1. Patients are under 50 years of age.
- 2. Pain is anterior or anterolateral in location.
- 3. It is usually associated with an overhead activity.
- 4. Rarely night pain, unless chronic.
- 5. Rursal side on the RTC is affected.
- 6. Attenuation of the static anterior stabilizers leads to fatigue of the dynamic anterior stabilizers and subsequent anterior subluxation.
- 1. Impingement is secondary to functional and/or static instability.

Internal Glenoid Impingement Characteristics

- 1. posterior-superior impingement
- 2. involvement of articular surface of the rotator cuff
- 3. primarily seen in athletes using extensive overhead activities
- 4. extension, abduction and external rotation
- 5. impingement of the under side surface of the rotator cuff against the post-superior glenoid<sup>2</sup>



posterosuperior glenoid impingement.

Initial Presentation

1. 65-year-old female with anterior shoulder pain when brushing her hair

a. primary impingement

- 2. 18-year-old baseball pitcher with anterior shoulder pain
  - a. secondary impingement
- 3. History

4. Exacerbating activities: reaching overhead, behind back, throwing, etc.

- 5. How long have the symptoms been present?
- 6. Is there a history of past trauma (micro or macro)?
- 7. Any neurological complaints?
  - a. Weakness is a neurological complaint when presenting without pain.

Symptom Patterns

- 1. Pain exacerbated by overhead activities and or symptomatic at night is classic for primary impingement. (Patient cannot lie on the shoulder.)
- 2. Secondary and internal impingement may present in this manner; however, pain is more predictably associated with overhead throwing and is less symptomatic at night.
- 3. Pain associated w/internal impingement usually is localized to the posterior aspect of the shoulder.
- 4. Neurological symptoms usually are associated with instability and the "dead-arm syndrome."
  - a. Patients complain of heaviness, but lack true neurological deficit.
  - b. The "dead arm" results from the humeral head tractioning the brachial plexus

during episodes of subluxation.<sup>3</sup>

References

- 1. Neer, JBJS (A), 1972.
- 2. Jobe, 1995; Arroyo, 1997; Buchberger, 2000
- 3. Rowe *JBJS* (A), 1981.

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SEPTEMBER 2003

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