ORTHOSPORTS

JEROME GOLDBERG - Shoulder Surgeon

PATIENT NOTES – CALCIFIC TENDONITIS

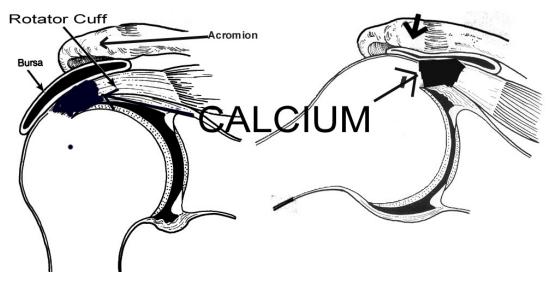
In this condition, deposits of calcium form in the tendons and muscles of the shoulder, called the Rotator Cuff. This is a common condition occurring in about 3 percent of the population. The highest incidence is in people aged 30 to 40 years. It occurs in both shoulders in about 15 percent of people.

The cause of this condition is UNKNOWN. The calcium formed does not relate to dietary intake of calcium but may be associated with a traumatic event.

In over 90 percent of cases, the deposits disappear spontaneously over a long period of time (about 18 months).

Symptoms vary in severity. The condition in most people is completely painless and these people occasionally get shoulder pain with movements of the arm and occasionally at night. Symptoms from this condition generally settle with little, if any, treatment.

A small percentage of people get acute, severe and unremitting pain. Fortunately when these symptoms occur, it usually means that the calcium is in the dissolving phase. The severe pain rarely lasts more than 72 hours. Patients with these symptoms require immobilisation of the shoulder in a sling, regular analgesics, ice over the tender area and occasionally injections of cortisone and anti-inflammatory tablets. Very rarely surgery is required. If you have these symptoms you are advised to be patient as after the severe symptoms settle, the residual mild symptoms rarely last more than 6 to 12 weeks.



Some patients develop what is known as IMPINGEMENT of the shoulder. This is where the calcium impinges on the acromion bone when the patient elevates the arm. Non operative measures using cortisone injections, anti-inflammatory tablets and occasionally physiotherapy when the shoulder is

stiff, alleviates most symptoms. Persons should attempt to be patient with this condition as in most cases the calcium resorbs spontaneously.

On the occasions that the calcium does not absorb spontaneously then there is the option of arthroscopic (minimally invasive) surgery where one can excise the calcium as well as trim the acromion bone which rubs on the rotator cuff with the calcium. This is done because it is not always possible to completely excise the calcium because it causes significant damage to the muscle. Rarely, there is significant Rotator Cuff damage as well, which requires the rotator cuff to be repaired at the same time. It takes about 6 months to recover from the surgery and there is a small risk of the calcium recurring.

REMEMBER

- Calcium usually disappears spontaneously with time
- Complete resolution of symptoms can take 12 to 18 months
- The acute phase can be very painful but rarely lasts more than 72 hours and is treatable
- If symptoms are severe or resolution slow, then arthroscopic surgery is indicated

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