

## Making the right call on sports injuries



## Wipeout: Shouldering On!

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Dimitri is a 16-year-old boy who comes to your office wearing a sling that is supporting his left arm. He comes to you with his mother to ask your advice for treatment. Dimitri explains that he fell while waterskiing barefoot. As he went down, his left arm was forced into extension and abduction long enough for him to hear a pop. Even so, it wasn't until he got into the boat that his left shoulders completely dislocated out of joint. Unfazed by it all, he manipulated his arm/shoulder to pop it back into joint. Dimitri's mother looks at you, half puzzled and half shocked by what her son is revealing.

You ask Dimitri if this is the first time that he has dislocated his shoulder.

Dimitri looks at you coolly and says "no." "My shoulder pops in and out all of the time." Once again Dimitri's mom looks perplexed, as if she is hearing all of this for the first time.

You tell Dimitri and his mom that it is vitally important that he keep the sling on for at least two weeks. There is controversy over whether a patient should wear a sling for six weeks or not wear one at all. shoulder protected not too aggressive physiotherapy can take place thereafter. The literature supports this approach, but it is not for everybody. For example, Dimitri indicated that his shoulder pops in and out of place all of the time. This would indicate that he probably has multidirectional instability (MDI) of the glenohumeral (GH) joint. This state of hyperelasticity of the soft

tissues/capsule of the GH joint would apply to both shoulders, as the same tissue is present in both shoulders.

Since it is not a first time traumatic dislocation, you can be a bit more aggressive with the rehabilitation. The program should really be applied to You decide that two weeks is a both shoulders. You do a curfair compromise, with his sory neurovascular examination to confirm that there is no damage to any of the nerves or blood vessels.

> Dimitri agrees to wear the sling for two weeks. You tell him that it has to be worn 24 hours a day, seven days a week and should only be taken off for bathing. Furthermore, you explain that the arm must be kept in the Napoleon position the whole time. You also

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mention to him that he should have an X-ray, as he didn't have one at the time of his dislocation and you have to confirm that there is no bone injury.

Dimitri returns to your office two weeks later. Having already seen that his X-ray was normal, you proceed to examine his shoulders. You confirm that he does indeed have MDI of both shoulders. As you had hoped, he has no tenderness and his range of motion is restricted, with diminished external rotation and abduction. You explain to Dimitri that this is a good sign and that it is time to begin his rehabilitation. You explain to him that his rehabilitation will focus not only on his overall range of motion, but also on his local shoulder and core strength. He has to continue to restrict his activity until seen in a follow-up appointment in four weeks time.

Dimitri returns for his followup appointment, quite upbeat as he virtually has a normal range of motion. He says that he feels stronger than before he dislocated his left shoulder and that he is ready to return to his regular activities.

You find out he plays competitive tennis and baseball, two sports that require shoulder movement. You reiterate that he is not yet ready to return to these sports, but that he should be able to do so in another six weeks to eight weeks. Although he is losing his patience, he agrees to follow your recommendations.

Dimitri returns to your office one last time. His shoulder looks great and he has very good strength. The instability is still evident, but he knows what it all means now. He is aware of the vulnerable position of abduction/external rotation and extension. He says that to

act preventively, he will continue his exercises long-term.

You suggest to Dimitri that if he is going to waterski in the future that he do so in the traditional way, with skis and to possibly use a shoulder protector, which will limit the degree of external rotation that is allowed and will keep his shoulder strong.

Dimitri thanks you for your good care, but ends with telling you how much fun it was to "wipeout." You tell him that although it may have been fun, the end result is that he has to "shoulder the pain."

Pain is the most effective motivator to help you be disciplined enough to do your exercises long-term, but you shouldn't go out of your way to create it.

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