



Cyriax Shoulder

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Humerus

좌; ant.view

우; post.view



Scapula



post.view



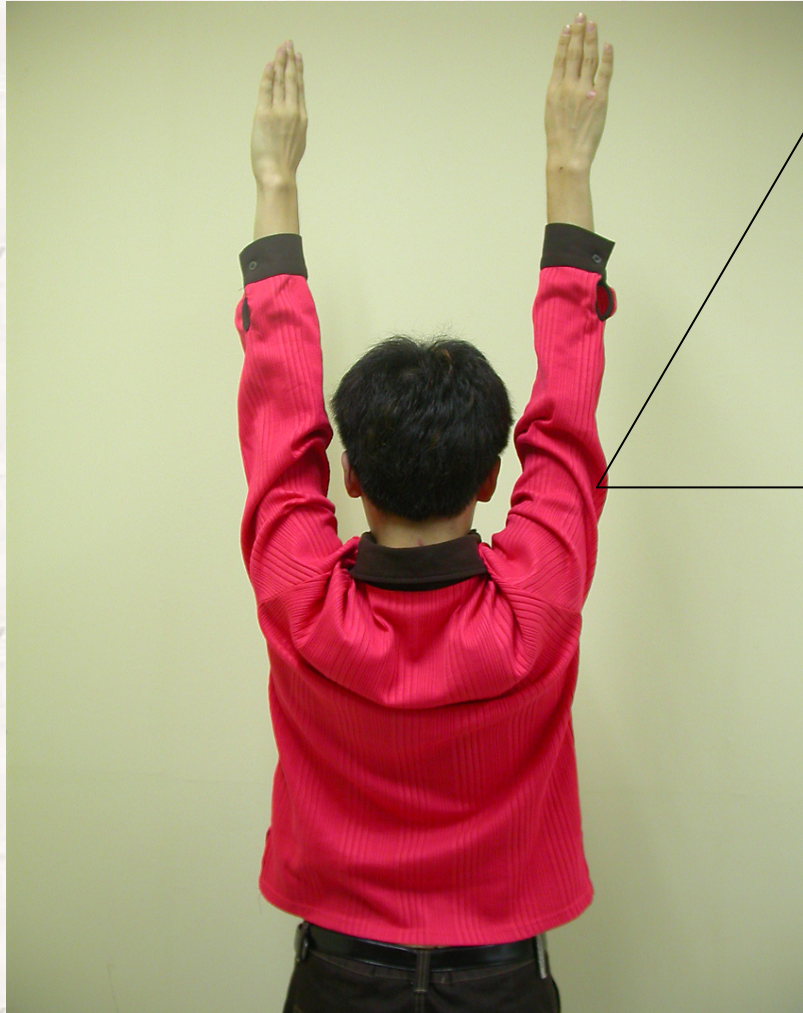
ant.view

Rotator cuff

- Subscapularis : subscapular fossa–
lesser tubercle
- Supraspinatus : supraspinous fossa–
greater tubercle
- Infraspinatus : infraspinous fossa–
greater tubercle
- Teres minor

- 
1. Active elevation
 2. Passive elevation
 3. Painful arc
 4. Passive abduction
 5. Passive lat. Rotation
 6. Passive med. Rotation
 7. Resisted abduction
 8. Resisted adduction
 9. Resisted lat. Rotation
 10. Resisted med. Rotation
 11. Resisted elbow flexion
 12. Resisted elbow extension
 13. Passive horizontal adduction

Active elevation



- pain & range
- Glenohumeral abduction
: 90°
- Rotation of the scapular
(along the thorax) : 60°
- Glenohumeral adduction
: 30°
- Give us a good idea of the patient's willingness

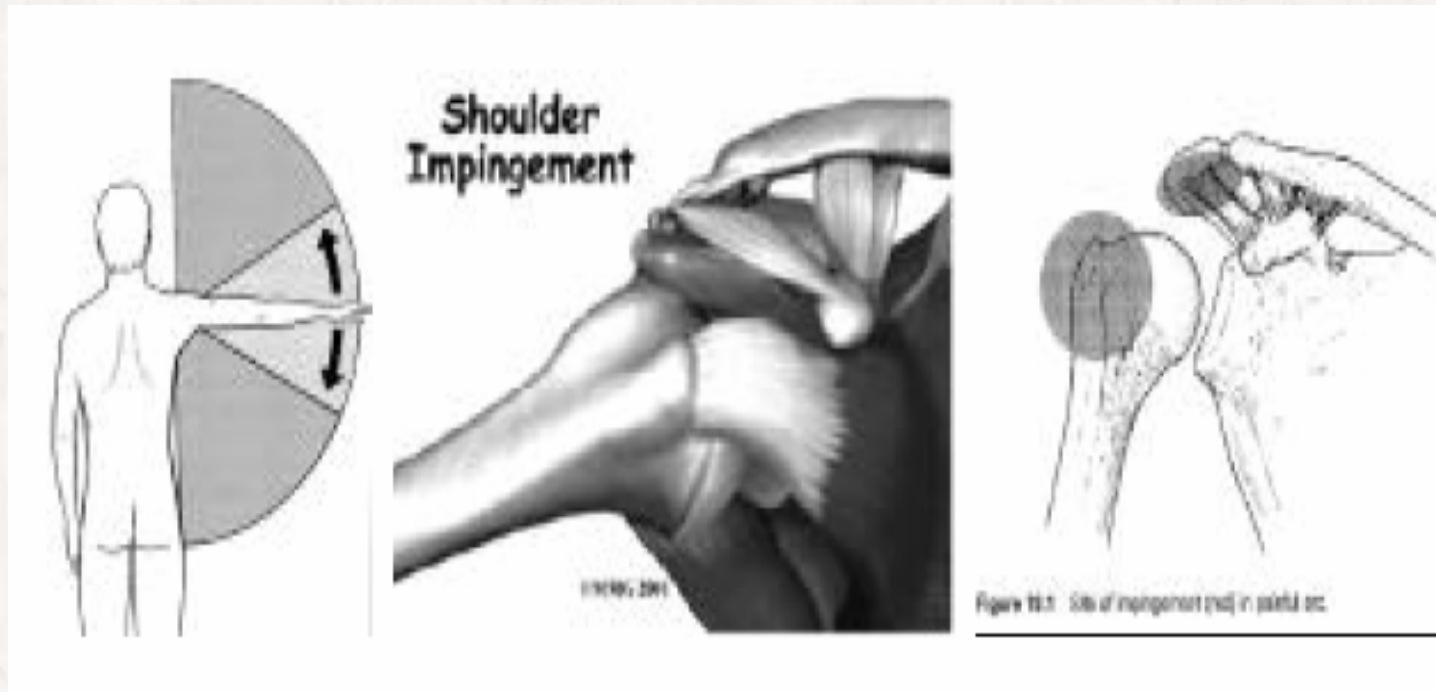
Active elevation

Passive elevation



- Pain range
- End-feel : elastic

Painful arc 란?



Passive abduction 측정



- Range
- Scapula

Passive lat. Rotation



- Pain과 range, end-feel(elastic)
- Immobilize the Pt's heterolateral shoulder
- Prevent abduction of the Pt's arm

Passive med. Rotation



- Pain, range & end-feel

- Fix Pt,s arm

- Painful arc : chronic subdeltoid bursitis

- Stop at Pt's trouser pocket : -30°
back pocket : -15°
sacrum : -5°

Resisted adduction



Pain & weakness

Pectoralis m.

Latissimus dorsi m.

Teres minor m.

major m.

Resisted abduction



- Pain & weakness
- Supraspinatus m.
- Deltoid m.

Resisted lat. Rotation



- Pain & weakness
- Infraspinatus m.
- Teres minor m.

Resisted med. Rotation



- Subscapular m.
- Teres major m.
- Pectoralis m.
- Latissimus dorsi m.

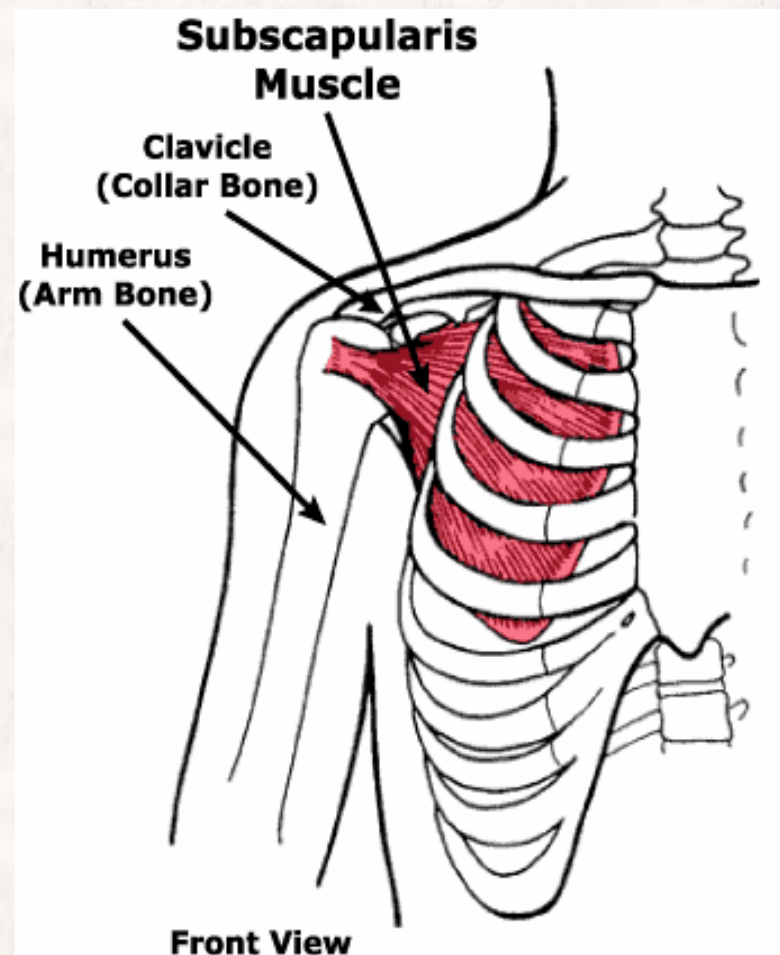
Passive horizontal adduction



- AC joint
- Subcoracoid bursitis
- subscapularis insertion, lower part tendinitis

Subscapularis

- 기능 : medial rotation
- Tenoperiosteal junction
 - 1번
 - 1) painful arch; superficial
 - 2) Passive horizontal adduction; deep insertion
- Trigger point-2,3번
- 문제 : medial rotation 시
Pain, weakness
- 치료 : 1. Muscle 방향에
trans. 하게 마사지-
(superficial)
 - 2. teno-periosteal
junction -약침. 봉독주사



Supraspinatus

- 기능 : abduction (0~30도)
- Tenoperiosteal junction-1 번
 - 1) painful arc ; superficial
 - 2)p. elevation ; deep
- Trigger point-2,3 번
- 치료 : 1. T-p joint 마사지
- 2. Infiltration

Infraspinatus

- 기능 : lat. Rotation
- Tenoperiosteal junction-1번
- 1) painful arc ; superficial
2)p. elevation ; deep
- Trigger point-2,3,4,5 번
- 문제 : lat. Rotation에 문제
- 치료 : Infiltration



Recapitulation scheme

[illegible]

4 site of supraspinatus, localizing sign

- R. abduction+
 1. Tenoperiosteal junction, superficial
;painful arc
 2. Tenoperiosteal junction, deep part
;passive elevation
 3. Tenoperiosteal junction, 1+2
; painful arc+passive elevation
 4. Musculotendinous junction
;no localizing sign
but resisted abduction test +



Treatment of supraspinatus t-p junction, superficial(1)

1. deep friction

;Pt sits with his arm behind the back.

The site is found

beyond the ant. Edge of acromion.

2. infiltration

Treatment of supraspinatus t-p junction, deep(2)

1. Pt position; forearm behind the back
2. t-p insertion lies
in the sagittal plane,
in front of the acromion.
3. the needle is inserted vertically
at the center of insertion.

Treatment of supraspinatus, m-t junction(4)

1. deep friction
; Pt arm lies in 90° of abduction.
Dr palpate the space
between spine of scapula and clavicle,
look for tenderness.
2. infiltration no

Recapitulation scheme

[illegible]

Active elevation limited passive elevation normal (5,6)

1. neuritis
2. History : some weeks of pain
some months of weakness
spontaneous recovery in 4–8 months
3. Limited A. elevation - scapular rotation failure
; gleno–humeral joint – 90° , scapular rotation – 60°
trapezius – 30°
; long thoracic neuritis - 45° limitation
serratus m.
; spinal accessory neuritis – 10° limitation
trapezius m.

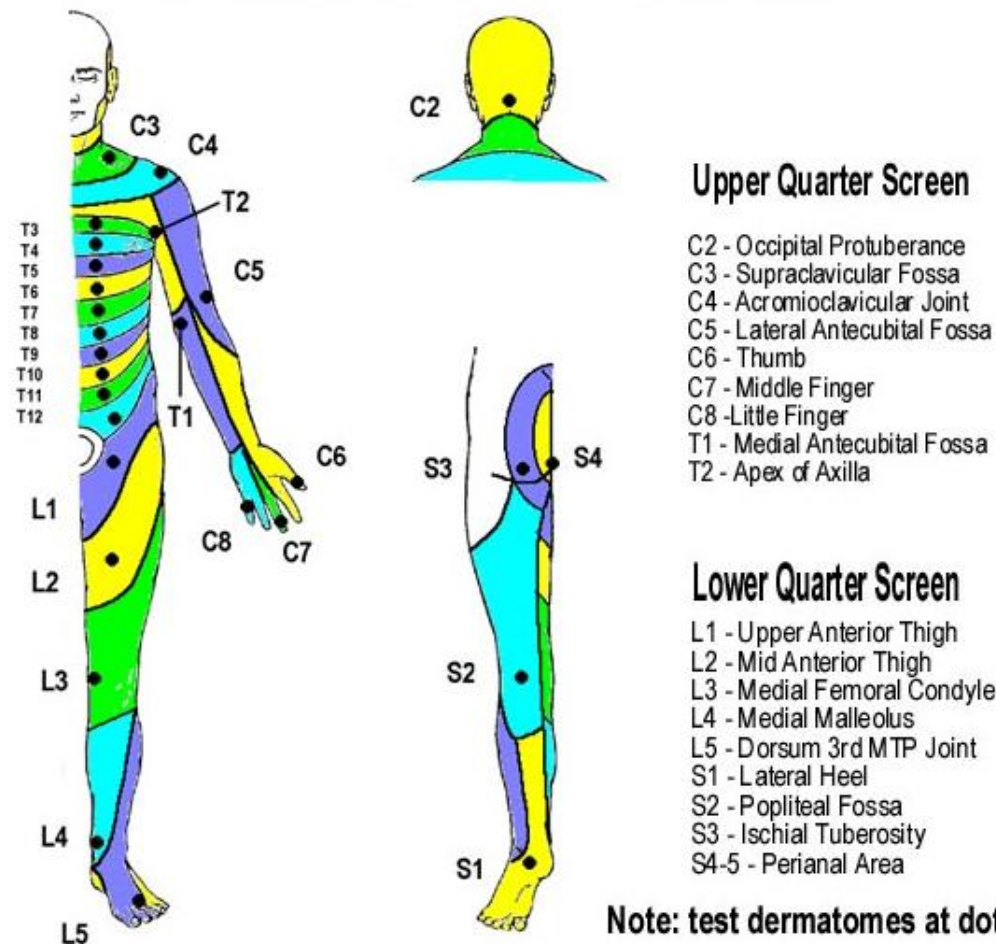
Recapitulation scheme

[illegible]

Cf) Dermatome

University of Scranton - Department of Physical Therapy

DERMATOME CHART



Chronic Sub-deltoid bursitis (7)

1. Primary sign; **painful arc**
2. **Incomprehensible bursitis**

Possible pain in p.elevation

in p.lateral rotation

in p.medial rotation

C5 dermatome pain

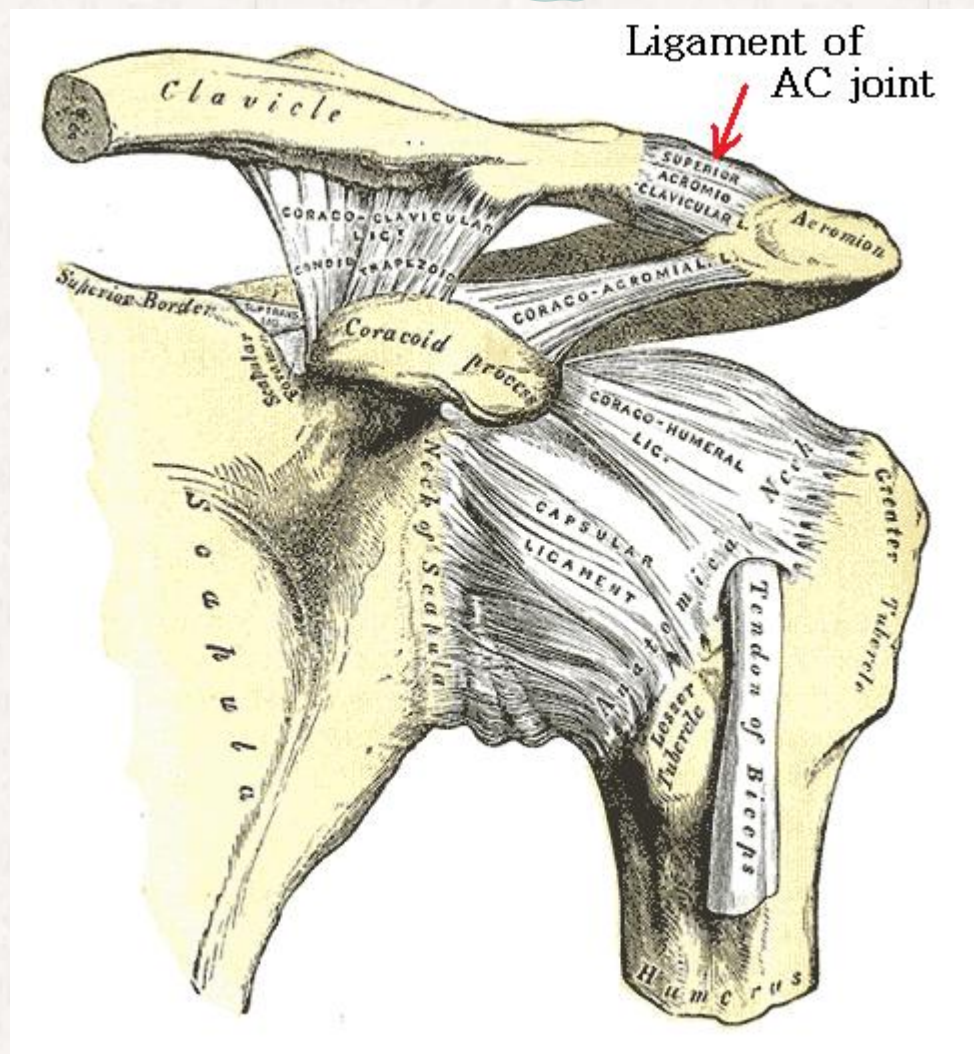
instead of C4 dermatome in AC lesion

3. Confirm Dx,Tx; infiltration

Recapitulation scheme

[illegible]

AC joint



Acromioclavicular joint (8)

1. AC joint superficial lesion

2. Diagnosis

P. elevation+painful arc

P. med. Rotation

P. lat. Rotation

P. horizontal adduction; ++

C4 dermatome pain

3. Treatment

1~1.5cm medially from the lateral edge of the acromion. → deep friction

Recapitulation scheme

[illegible]

CP / NCP

1. P. lat. Rotation / P. med. Rotation.
 - ; 30 / full range but pain
 - ; 60~70 / 10~15
 - ; 90~100 / 15~25
2. P. lat. Rotation
 - ; empty end feel – CP

Capsular pattern arthritis(9)

1. Determining the stage of on arthritis

1) 3question

- ① Pain beyond the elbow
- ② Can the patient lie on that side night
- ③ Pain at rest

2) 1 exam

- End feel on passive lateral rotation

2. End-feel on P. lateral rotation

; pain or resistance

; empty end feel

Evolution of limitation in traumatic arthritis & Tx of traumatic arthritis

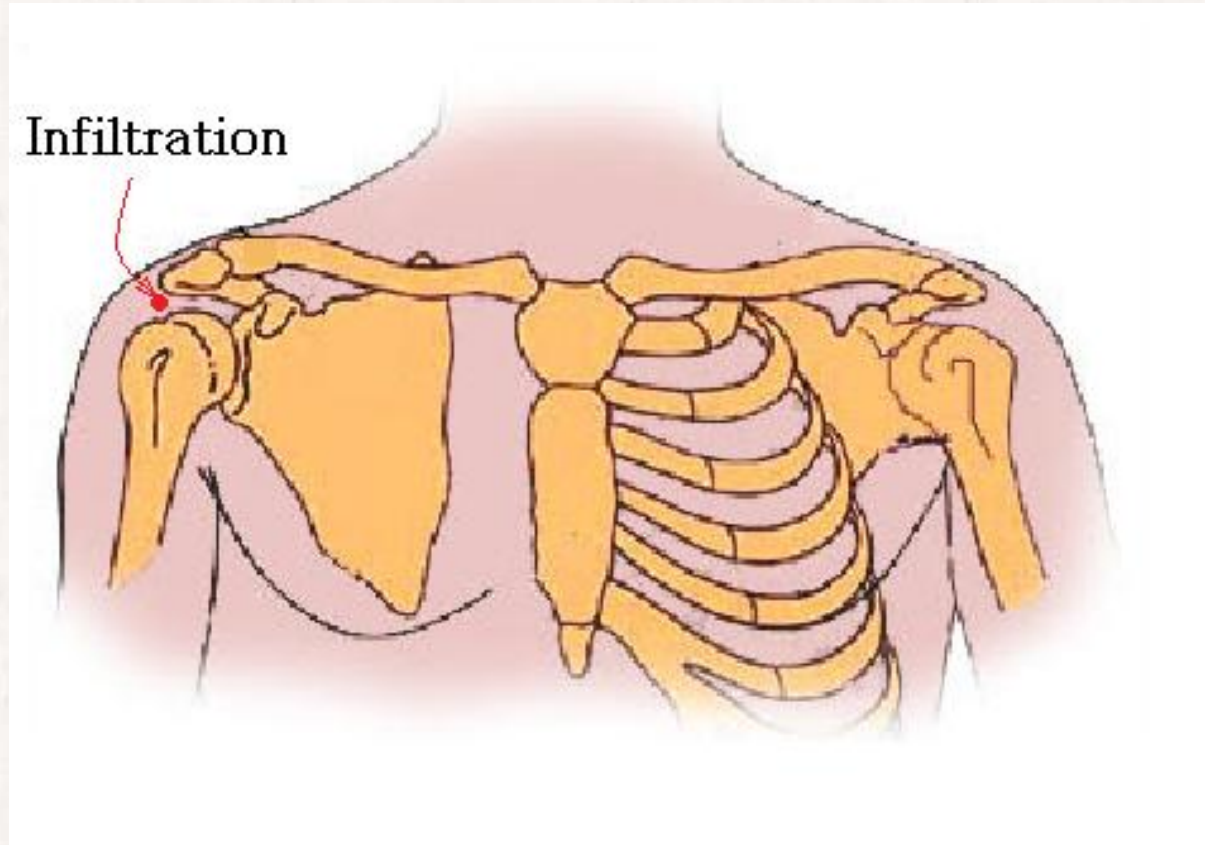
1. Limitation (lat. rot / abd / med. rot)

- After 10 days → 20° / 5° / nl
- After 1 month → 60° / 20° / 10°
- After 3–4 month → 80° / 45° / 15°

2. Treatment

- 1) Stage 1 → capsular stretching
- 2) Stage 2 → distraction
 - 2+ : more mobilization
 - 2- : manual therapy
- 3) Stage 3 → vibration, infiltration

Infiltration at Stage 3



Traumatic arthritis typical Hx

1. Age over 45
2. Onset trivial
3. After 3–4days pain return
4. First 3–4month pain that get worse
5. After 9–12month pain gradually ease

Acute subdeltoid bursitis (10)

1. History.

- Onset;spontaneous
- Age;any age from adolescence
- Evolution
 - 1) 1st day; slight arm pain
 - 2) 2nd day; much worse
 - 3) 3rd day; extreme pain

2. Ex.

- Non capsular pattern
- More painful in abduction than in lat. Rotation

3. Symptom

- C5 dermatome
- Spontaneous recover 6weeks

4. Treatment

- injection

Recapitulation scheme

[illegible]

Acute subdeltoid bursitis (10)

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- C5 dermatome
- Spontaneous recover 6weeks

4. Treatment

- injection

Recapitulation scheme

[illegible]

Suprascapular neuritis(11)

1. Suprascapular neuritis

1) Supraspinatus m.

→ abduction : lesser weak (deltoid m. support)

2) Infraspinatus m.

→ lat. Rotation : greater weak

– Suprascapular n. – Neuritis.

Recapitulation scheme

[illegible]

Complete rupture of supraspinatus(tendon) (12)

1. History

- 1) Probably elderly, the tendon rupture without having heard or felt anything
- 2) Pt can say that he cannot lift arm any more

2. Diagnosis

- 1) The deltoid m. can pull the head of humerus upwards but not abduction 120° limit → 60° of active elevation
- 2) P. elevation 時 pain
painful arc

3. Treatment

- 1) 2X3 triam to get rid of painful arc
- 2) Maintain mobility at the shoulder joint