

Shoulder Hydrodilataion

Background

- Adhesive capsulitis, or “frozen shoulder”, is a condition that results in inflammation of the shoulder joint and formation of scar tissue
- There is often resultant pain, restricted motion and debility
- The cause is often unknown, and it can be recurrent
- This condition can be self-limiting, but may benefit from this procedure
- The procedure reduces the degree of inflammation and scar tissue in the joint, and assists in reducing the pain and improving the range of motion

Preparation

- If imaging has been performed elsewhere, please bring any previous relevant CT or MRI with you
- Please advise us at the time of booking if you are taking any blood thinning medication (Warfarin, Plavix), as some need to be stopped 5-7 days prior to the procedure
- Please arrange for a responsible adult to drive you home after the procedure

Potential Risks

- This is a commonly performed procedure, and generally does not result in serious complications
- The injected medication may cause facial blushing/redness, or a rash, which can last for a few days, before resolving
- The steroid may cause fluctuation on blood glucose levels in patients with diabetes, and close monitoring of BSL is recommended
- Although rare, serious risks include:
 - Infection: the majority (1-2%) are minor, however, can be serious (<0.1%) requiring intravenous antibiotics and hospital admission
 - Bleeding/Haematoma: rare, but particularly in patients on “blood thinning” medication, or bleeding disorders

Procedure

- The procedure takes up to 15 minutes, and is usually tolerated well
- You will be positioned on the CT table onto your stomach
- An initial low dose planning CT will be performed, to confirm the position for injection and best approach into the joint
- Your skin will be marked with a texta, and an antiseptic wash applied
- Short acting local anaesthetic is injected, which may sting for 10-30 seconds before numbing the region
- A very fine needle is advanced deeper, towards the joint
- The needle may need a few adjustments, until the needle tip is positioned with the joint
- A small volume of contrast, long acting local anaesthetic, and steroid are injected
- Sterile saline is then injected, and the joint distended to break down the scar tissue (adhesions)
- Due to the distension, it is common to feel tightness, pressure, and discomfort in the shoulder, and down the arm
- The local anaesthetic wears off after a few hours
- The steroid can take between 24 hours and up to 2 weeks for complete effect

Aftercare

- You may feel some minor discomfort at the site of injection
- The local anaesthetic should result in you being pain free for as short period of time
- Please do not drive for the rest of the day
- Please consult your referring doctor if rest is required post procedure, or if an exercise routine is recommended

Injection Efficacy

- The steroid reduces the degree of inflammation and swelling within and around the joint
- Pain relief and improved range of motion can last for weeks, months or years
- The duration of symptom improvement varies, and unfortunately, cannot be accurately predicted prior to the procedure
- Very occasionally, pain and reduced range of motion may persist, despite a satisfactorily performed procedure
- Occasionally multiple injections are required