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# To study the correlation between scapular asymmetry and shoulder rom, pain and functional disability along with the physiotherapy management in patients with peri-arthritis shoulder

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The human shoulder is a complex structure and three bones joined together form shoulder joint along with the various muscles, tendons and ligaments. The three major bones involved in human shoulder are the clavicle, also known as the collarbone, the scapula, formed the blade kind of structure over the shoulder and the third one is human i.e. the bone of the upper arm. These three bones come together and form the shoulder joint.

Shoulder joint is a ball and socket kind of synovial joint and permits wide range of movement in the human body. Shoulder joint is a complex ball and socket type of joint that is surrounded by group of muscles. As it is a ball and socket type of joint, it is capable of high range of motion movements.

Adhesive capsulitis is a painful and disabling disorder which has unclear underlying cause in which all the structures around the shoulder joint are involved. The joint becomes inflamed, there is restriction in the movement and there is a consistent painin and around the shoulder joint. Adhesive capsulitis has an incidence of 3–5% in the general population and up to 20% in those with diabetes. This disorder is one of the most common musculoskeletal problems seen in orthopaedics.

There are numerous studies in the literature concerning scapular asymmetry in patients with unilateral shoulder and neck pathologies. This asymmetry is assessed in different ways, such as palpation, radiographic measurement methods, and the LateralScapular Slide Test (LSST).

Treatment of adhesive capsulitis or frozen shoulder may take very long time and involves therapeutic treatment along with medical treatment. Physiotherapy plays a very important role in the treatment of frozen shoulder. It is also said that if not treated this condition of frozen shoulder has this self-limiting nature. Pain and inflammation can be controlled with analgesics and NSAIDs.

# Findings & conclusion

The study findings revealed that scapular asymmetry showed significant association with range of motion, functional disability in patients with adhesive capsulitis; however a weak rlationship was seen between scapular asymmetry and pain.

The study also concluded that short wave diathermy (swd) gives better results in adhesive capsulitis as compared to ultrasound (us) therapy on various parameters. Swd has shown better results in improving pain, joint range of motion and functional movement of the shoulder joint suffering from adhesive capsulitis. It is further concluded from the study that us therapy is also helpful in reducing pain, improving joint range of motion and improving functional movement of the shoulder joint but when compared with swd the results were better in favour of swd.

## **Biography**

Dr. Mukesh kumar, he is working as a Dean-Faculty of Medical, Paramedical and Allied Health Sciences, Tantia University, India

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