

Radial Shockwave Therapy for the Treatment of Rotator Cuff Rupture and Pericapsulitis: A Case Report

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At the international ISMST congress in Vienna, the consensus for shoulder tendinopathies treatment was oriented to focal shockwave therapy. However, there are no scientific publications to our knowledge describing the treatment of rotator cuff rupture and pericapsulitis with RSWT.

We present a 57-year-old woman with a rotator cuff rupture of the left shoulder one year after an accidental fall. She received multiple unsuccessful treatments until she was booked for surgery by the orthopaedist.

The patient chose a non-surgical treatment before the procedure. Physical examination showed pain (VAS) at rest (3/10), at any movement (9/10), pressure (7/10) and abduction shoulder rise (10/10). There was a clear hyperalgesic area at the deltoid area. She could perform shoulder motion actively against gravity. The MRI reported a subacromial impingement, rotator cuff rupture and biceps tendonitis. We applied RSWT without anaesthesia, with 2,000 impulses at 2.5 BAR maximum and 8 Hz in 3 sessions at one week intervals.

We prescribed analgesics, ice packs and pendulum and stretching exercises.

After one month the patient had no hyperalgesia, no pain at rest or starting any movement. She had pain after flexion over 90°. We observed an increase in range of motion. She could raise her hand over 90° of flexion, 70°-80° of abduction and initiate rotation. She still had capsular adhesion but physical therapy could be restarted.

Our findings in this patient showed good results using RSWT in rotator cuff rupture with pericapsulitis. We believe it could be safely used when the conditions are not optimum for surgery.