ACROMIOCLAVICULAR JOINT ARTHRITIS

♦ What is it?

Some joints in the body are more likely to develop problems due to normal wear and tear. The wear and tear can result in a condition called osteoarthritis, a type of arthritis caused by degeneration. The acromioclavicular (AC) joint in the shoulder is a common spot for osteoarthritis to develop in middle age. Degeneration of the AC joint can be painful and can cause difficulty using the shoulder for everyday activities.

We use our shoulder constantly. The resulting strain makes AC joint osteoarthritis a common disorder. The AC joint is under constant pressure as the arm is used overhead. Weightlifters, repeatedly lift heavy weights overhead, also have an increased incidence of the condition and at a younger age.

AC joint arthritis may also develop following an injury to the joint, such as an AC joint separation. This injury is fairly common. A separation usually results from falling on the shoulder. The shoulder does heal, but many years later degeneration causes the AC joint to become painful.

♦ Signs and Symptoms of this Condition

- Diffuse discomfort or ache, tenderness, and swelling at the end of the collarbone or the acromioclavicular (AC) joint (the top of the shoulder).
- Pain on the top of the shoulder worsens when reaching across the body toward the opposite shoulder, since this motion compresses the joint.
- There may be a bigger bump over the involved AC joint than the non-painful shoulder.

♦ Causes

- Can result from years of weightlifting.
- From the daily demands we place on our shoulders through work and lifting.
- Past history of an AC joint separation injury.

♦ What Can I do to Prevent AC Joint Arthritis?

- Limit amount and frequency of weightlifting.
- Vary weightlifting routine.
- Use proper technique and avoid use of very heavy weight.
- Many of our daily activities or work that may contribute to the wear and tear of this joint are unavoidable.
◆ Prognosis

- The arthritis cannot be reversed, but a prolonged period of rest at the first onset of symptoms (6 weeks from aggravating activities), ice, and anti-inflammatories (aspirin, ibuprofen, etc.) may resolve an episode of pain.
- Continued activity results in persistent pain and disability.
- In chronic cases, injection of the joint or surgery may be necessary.

◆ Treatment

- Rest – avoid overhead motions and motions across the body; avoid weightlifting, push-ups or pull-ups, and pushing or pressing motions of the shoulder/upper extremity.
- Ice over the Acromioclavicular joint 15-20 minutes 1-2 times per day.
- Anti-inflammatory medication (aspirin, ibuprofen, etc) may be helpful in reducing both pain and inflammation.
- Slow progression back into activity once symptoms resolve.
- In chronic cases, injection of the joint or surgery may be necessary.