

Shoulder Pain That Won't Go Away? Here's What It Might Mean

Shoulder pain can make even simple movements feel like a chore. Reaching into a cabinet, putting on a jacket, lifting a child, sleeping comfortably, or completing a normal workday may become increasingly difficult.

Occasional soreness may improve with time, but shoulder pain that persists, returns repeatedly, or limits movement deserves a closer look. The shoulder is a complex joint, and several different injuries or conditions can cause similar symptoms.

At [Summit Orthopaedics](#), we evaluate persistent shoulder pain for patients in Idaho Falls and throughout Eastern Idaho. Our orthopaedic team identifies the source of the problem and creates a personalized treatment plan focused on relieving pain, restoring movement, and protecting long-term shoulder function.

What Causes Shoulder Pain That Won't Go Away?

Persistent shoulder pain can develop suddenly after an injury or gradually over several weeks or months. Sometimes the source is within the shoulder itself. In other cases, pain may travel from the neck or involve several nearby structures.

The shoulder contains bones, joints, muscles, tendons, ligaments, cartilage, and fluid-filled sacs called bursae. These structures work together to provide an exceptionally wide range of motion. That flexibility also makes the shoulder vulnerable to overuse, instability, inflammation, and injury.

Our [musculoskeletal injury](#) care addresses conditions involving bones, joints, muscles, ligaments, and tendons. We begin with a detailed evaluation because successful treatment depends on understanding which structure is affected and why symptoms have continued.

Common causes of ongoing shoulder pain include:

- Rotator cuff injuries
- Tendinitis
- Bursitis
- Shoulder impingement
- Arthritis
- Labral tears
- Frozen shoulder
- Joint instability
- Fractures or dislocations
- Repetitive-use injuries
- Pain originating in the neck
- Advanced joint damage

The location of your pain may provide useful clues, but symptoms alone aren't always enough to identify the cause. Different shoulder conditions can produce overlapping pain, weakness, stiffness, and clicking.

Rotator Cuff Tendinitis or a Rotator Cuff Tear

The rotator cuff is a group of muscles and tendons that stabilizes the shoulder and helps lift and rotate the arm. These tendons can become irritated through repetitive use, age-related changes, or a sudden injury.

Rotator cuff tendinitis may cause pain when reaching overhead, lifting an object, or lying on the affected side. Symptoms sometimes begin as a mild ache and become more noticeable as inflammation continues.

A rotator cuff tear may develop gradually or happen during a fall, forceful pull, or lifting injury. Possible signs include:

- Pain along the side or front of the shoulder
- Weakness when raising or rotating the arm
- Difficulty reaching behind the body
- Discomfort that interrupts sleep
- A popping or catching sensation
- Reduced ability to perform overhead tasks

Not every tear produces severe pain. Some patients notice weakness or loss of function before discomfort becomes significant.

Through our [sports injuries](#) services, we treat shoulder injuries affecting athletes, active adults, children, and patients recovering from trauma. Our specialists consider the injury, activity level, physical demands, and long-term goals when recommending care.

Shoulder Impingement and Bursitis

Shoulder impingement occurs when tendons or other soft tissues become compressed during arm movement. This irritation often develops in the space beneath the top of the shoulder blade.

Bursitis involves inflammation of a bursa, which normally helps reduce friction between moving tissues. Impingement and bursitis frequently occur together and may create pain during overhead movement.

Common symptoms include:

- Pain when raising the arm
- Tenderness on the outer shoulder
- Discomfort when reaching into a back pocket
- Pain when putting on clothing
- Nighttime aching
- Weakness caused by pain
- A painful arc during movement

The discomfort may initially appear only during certain activities. Without appropriate evaluation and care, symptoms can become more frequent and begin affecting routine movements.

Shoulder Arthritis

Shoulder arthritis develops when protective cartilage within a joint wears down or becomes damaged. As the joint surfaces lose cushioning, movement can become painful, stiff, and less predictable.

Patients with shoulder arthritis may experience:

- A deep ache within the joint
- Grinding, clicking, or catching
- Reduced range of motion
- Increasing stiffness
- Pain during activity
- Discomfort at rest or at night
- Difficulty reaching overhead or behind the body

Arthritis may develop with age, after a previous injury, because of inflammatory disease, or following years of physical stress on the joint.

Our [arthritis and osteoporosis](#) care helps patients manage conditions that affect mobility and quality of life. We assess the degree of joint damage and recommend treatment based on symptoms, imaging, health, and daily needs.

When shoulder arthritis becomes severe, joint replacement may be considered. Our [total joint replacement](#) services include advanced treatment for qualifying patients whose pain and loss of function have not improved adequately with less-invasive care. Summit Orthopaedics also provides standard and reverse shoulder replacement options based on joint damage, rotator cuff function, bone quality, and individual goals.

Frozen Shoulder

Frozen shoulder, also called adhesive capsulitis, causes pain and progressive stiffness. The tissues surrounding the shoulder joint become tight, making movement increasingly difficult.

Symptoms often develop in stages. Pain may be the dominant concern at first. As the condition progresses, stiffness can become severe enough to interfere with dressing, grooming, reaching, and sleeping.

People with frozen shoulder may notice:

- Gradual loss of movement
- Difficulty rotating the arm
- Pain at the limits of motion
- Trouble reaching overhead
- Difficulty reaching behind the back
- Nighttime discomfort

- A shoulder that feels physically “stuck”

Frozen shoulder can occur without an obvious injury, although it may also develop after surgery, immobilization, or another condition that limits normal shoulder use.

An accurate diagnosis matters because forcing a painful, stiff shoulder without understanding the cause may aggravate symptoms. We determine which treatments are medically appropriate based on the stage and severity of the condition.

Labral Tears and Shoulder Instability

The labrum is a rim of cartilage that helps deepen the shoulder socket and support stability. It can be injured during sports, falls, dislocations, repetitive overhead activity, or forceful pulling.

A labral tear may cause:

- Deep shoulder pain
- Catching or locking
- Clicking or popping
- Weakness
- Reduced athletic performance
- A feeling that the shoulder may slip
- Pain with throwing or overhead movement

Shoulder instability occurs when the joint moves excessively or partially slips out of position. Some patients develop instability after a traumatic dislocation. Others have naturally loose joints or experience repeated stress that gradually affects stability.

Instability shouldn't be judged by pain alone. A shoulder that feels unreliable, loose, or prone to slipping may require evaluation even when discomfort is mild.

Could Shoulder Pain Actually Be Coming From the Neck?

Not all pain felt near the shoulder begins in the shoulder joint. Nerves traveling from the neck can become irritated or compressed, creating pain that spreads into the shoulder, arm, or hand.

Signs that symptoms may involve the neck include:

- Pain that travels below the shoulder
- Numbness or tingling
- Burning or electric sensations
- Hand or arm weakness
- Symptoms affected by neck position
- Pain between the shoulder blades
- Reduced grip strength

Our [spine conditions](#) services allow us to evaluate neck-related causes of shoulder and arm pain. Summit Orthopaedics offers conservative treatment, advanced imaging, nerve testing when needed, and surgical options for qualifying spine conditions.

Distinguishing a shoulder injury from a cervical spine condition is essential because the correct treatment depends on where the symptoms originate.

Persistent Shoulder Pain After a Workplace Injury

Shoulder injuries are common in jobs that require lifting, pulling, carrying, reaching overhead, repetitive arm movement, or physically demanding labor.

Symptoms may begin after one clear accident or build gradually from repeated stress. Work-related shoulder conditions can include tendon injuries, sprains, bursitis, fractures, instability, and aggravation of an existing orthopaedic problem.

Through our [work-related injury care](#), we evaluate occupational injuries and develop treatment plans based on the diagnosis and physical requirements of the patient's job. Summit Orthopaedics treats work-related fractures, sprains, ligament and tendon tears, repetitive-use injuries, and aggravations of pre-existing orthopaedic conditions.

When appropriate, we may also provide medically supported work restrictions or modified-duty recommendations. These guidelines help protect the shoulder while allowing recovery to progress.

When Should You See an Orthopaedic Specialist for Shoulder Pain?

Shoulder pain doesn't need to be unbearable before it deserves professional attention. Symptoms that persist or interfere with normal function may indicate a condition that requires diagnosis and treatment.

Schedule an orthopaedic evaluation when you experience:

- Pain that lasts more than several days or keeps returning
- Increasing stiffness
- Weakness when lifting the arm
- Difficulty completing normal tasks
- Pain that disrupts sleep
- Clicking, catching, or grinding
- Numbness or tingling
- A feeling that the joint is unstable
- Symptoms following a fall or accident
- Reduced athletic or work performance
- Pain that doesn't improve with earlier treatment

Sudden pain, visible deformity, severe swelling, loss of movement, or symptoms following significant trauma may require more urgent evaluation.

Summit Orthopaedics recommends assessment for persistent pain, recurring symptoms, weakness, numbness, tingling, or joint instability.

How We Diagnose Persistent Shoulder Pain

Shoulder pain can have several possible causes, so we begin by learning how the symptoms started and how they affect your life.

We may ask about:

- Recent injuries
- Previous shoulder problems
- Pain location
- Movements that worsen symptoms
- Nighttime discomfort
- Weakness or instability
- Numbness or tingling
- Sports participation
- Work duties
- Previous treatment
- Your goals for recovery

A physical examination helps us assess tenderness, range of motion, strength, stability, and function. We may also examine the neck, elbow, or surrounding areas when symptoms suggest another source.

Our [advanced digital imaging](#) services help us evaluate bones, alignment, arthritis, fractures, and other structural changes. Depending on the suspected condition, additional imaging or nerve testing may be appropriate. Summit Orthopaedics bases treatment plans on a thorough examination and the imaging needed to understand the condition accurately.

A precise diagnosis helps prevent unnecessary treatment and allows us to focus on the actual reason the shoulder continues to hurt.

Can Chronic Shoulder Pain Be Treated Without Surgery?

Many shoulder conditions can be treated without surgery, especially when they are identified before severe damage or loss of function develops.

Our [nonsurgical orthopedics](#) approach may include options such as physical therapy, activity modification, medication, bracing, or image-guided injections when medically appropriate. Summit Orthopaedics generally begins with conservative care and develops an individualized plan based on the diagnosis, symptoms, and patient's goals.

The purpose of conservative treatment may be to:

- Reduce inflammation
- Relieve pain
- Restore movement
- Improve strength
- Increase joint stability
- Protect injured tissues
- Support safe activity

- Reduce the likelihood of recurring symptoms

Treatment is not identical for every shoulder condition. A plan for arthritis may differ significantly from treatment for instability, tendinitis, or a rotator cuff tear.

We monitor progress and adjust care when symptoms, strength, mobility, or daily function do not improve as expected.

When Is Shoulder Surgery Considered?

Surgery may be considered when a significant injury, advanced joint damage, or persistent symptoms do not respond adequately to conservative treatment.

Potential surgical conditions include:

- Certain rotator cuff tears
- Labral injuries
- Recurrent instability
- Severe arthritis
- Fractures requiring fixation
- Damaged cartilage
- Loose bone or tissue fragments
- Advanced loss of joint function

When appropriate, [minimally invasive orthopedic surgery](#) may allow our surgeons to diagnose or repair shoulder problems through smaller incisions. Arthroscopic shoulder procedures may be used for conditions involving the rotator cuff, labrum, cartilage, or impingement.

A recommendation for surgery is never based on one symptom alone. We consider imaging, examination findings, previous treatment, overall health, functional limitations, and what the patient needs the shoulder to do.

Our goal is to recommend the most appropriate level of care, whether that means conservative treatment, a minimally invasive procedure, or a more advanced reconstruction.

Find the Source of Your Shoulder Pain in Idaho Falls

Shoulder pain can affect nearly every part of your day, from getting dressed in the morning to finding a comfortable sleeping position at night. Waiting for persistent symptoms to disappear may allow weakness, stiffness, or joint damage to become more limiting.

At Summit Orthopaedics, we provide specialized shoulder evaluation, advanced imaging, nonsurgical care, and surgical treatment for patients in Idaho Falls and across Eastern Idaho. We take the time to identify what is causing the pain and explain which options may help you move forward.

You don't have to keep adjusting your life around a painful shoulder. [Contact us to schedule an appointment](#) with our orthopaedic team. We'll evaluate your symptoms, answer your questions, and create a treatment plan focused on restoring comfortable, dependable movement.

Related Questions

Can shoulder problems cause headaches?

A shoulder condition does not usually cause headaches directly. However, neck problems, muscle tension, and altered posture may contribute to pain that travels toward the head.

Why does my shoulder make noise without hurting?

Popping or clicking can occur when tendons move or pressure changes within the joint. Noise without pain may not indicate damage, but new weakness, instability, or loss of motion should be evaluated.

Can shoulder pain affect grip strength?

Yes. Pain may limit how strongly you use the arm, while nerve irritation originating in the neck can cause true weakness in the hand or grip. An examination can help identify the source.

Are shoulder conditions more common with age?

Some conditions, including arthritis and degenerative rotator cuff tears, become more common over time. Persistent symptoms aren't simply something you must accept as part of aging.