

Frozen Shoulder (Adhesive Capsulitis)

What You Need to Know

What Is Frozen Shoulder?

Frozen shoulder — medically called adhesive capsulitis — is a condition in which the capsule surrounding the shoulder joint becomes inflamed, thickened, and covered with scar tissue (adhesions). This causes the capsule to tighten and shrink, progressively restricting motion in all directions until the shoulder becomes extremely stiff and painful.

It typically develops in three overlapping stages and can last anywhere from 1 to 3 years without treatment. It is more common in people aged 40–60, in women, in people with diabetes, and in those who have had the shoulder immobilized after injury or surgery.

The Three Stages

Stage 1 — Freezing (2–9 months):

- Gradual onset of increasing shoulder pain
- Motion begins to diminish — especially rotation and reaching overhead
- Pain is often severe and worse at night

Stage 2 — Frozen (4–12 months):

- Pain may ease somewhat but stiffness worsens significantly
- Motion is severely restricted in all directions
- Daily activities — dressing, reaching, driving — become very difficult

Stage 3 — Thawing (5–24 months):

- Motion gradually returns
- Pain continues to decrease
- Most patients regain near-full motion with time and treatment

What Does It Feel Like?

- Constant dull aching pain in the shoulder, worse at night
- Severe stiffness — difficulty reaching overhead, behind the back, or to the side

- Pain with any attempt to move beyond the restricted range
- Difficulty with everyday tasks: putting on a coat, fastening a bra, combing hair

What Causes It?

- Often develops spontaneously with no clear cause
- More common after shoulder injury, surgery, or prolonged immobilization
- Strongly associated with diabetes — diabetics have significantly higher rates and slower recovery
- Thyroid disorders and cardiovascular disease are also associated
- Can occur after a stroke (shoulder on the affected side)

When Should I Be Concerned?

- If there is no improvement at all after 3+ months of consistent PT
- Severe pain that prevents any sleep, despite medication
- Sudden worsening — rule out a concurrent rotator cuff tear

The Good News

The majority of frozen shoulder cases resolve with time and physical therapy. PT does not cure it overnight, but consistent treatment significantly speeds recovery, maintains whatever motion you have, and helps you regain motion more quickly than leaving it untreated. Corticosteroid injections combined with PT are often very effective in the freezing stage. Most patients regain functional motion.

With physical therapy and appropriate medical management, most patients regain functional and often near-full motion of the shoulder.

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