

Shoulder Impingement Syndrome

What You Need to Know

What Is Shoulder Impingement?

Shoulder impingement syndrome occurs when the tendons of the rotator cuff or the bursa (a fluid-filled sac) become pinched or compressed between the top of the upper arm bone and the outer edge of the shoulder blade (acromion). This pinching causes pain, inflammation, and — if left untreated — can eventually lead to tendon damage or tearing.

It is one of the most common causes of shoulder pain, particularly in people who perform repetitive overhead activities — swimmers, painters, overhead athletes, and construction workers — as well as in older adults with degenerative changes in the shoulder.

What Does It Feel Like?

- Pain when lifting the arm to the side or overhead, particularly between 60° and 120° of elevation — the "painful arc"
- Pain reaching behind the back or across the body
- A dull, aching pain in the front and outer shoulder
- Pain at night, especially lying on the affected side
- Weakness with lifting or reaching
- Occasional clicking or catching with arm movement

What Causes It?

- Poor posture — rounded shoulders and forward head reduce the space under the acromion
- Weak rotator cuff muscles that allow the humeral head to ride upward
- Tight posterior capsule — pulls the humeral head forward and up
- Bone spurs or an abnormally shaped acromion narrowing the space
- Repetitive overhead activities without adequate conditioning
- Rotator cuff weakness or tendinopathy

What Makes It Worse?

- Reaching overhead or behind the back
- Lifting the arm out to the side
- Sleeping on the affected shoulder
- Prolonged computer use with poor posture
- Throwing, swimming, or any repetitive overhead activity

When Should I Be Concerned?

- Complete inability to lift the arm — may indicate a full rotator cuff tear
- Severe weakness that developed suddenly after an injury
- Symptoms that worsen significantly despite rest and PT

The Good News

Shoulder impingement responds very well to physical therapy. By strengthening the rotator cuff and scapular stabilizers, stretching the posterior capsule, and correcting posture and movement patterns, most patients resolve their symptoms completely without surgery. Early treatment prevents progression to a more serious tear.

Most patients with shoulder impingement experience significant improvement within **6 to 12 weeks** of focused physical therapy.

This information is for general educational purposes only and is not a substitute for a professional evaluation. Call us today — we have immediate openings with no waitlist.

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