Materials and methods of adhesive capsulitis

Keywords: Adhesive Capsulitis; Arthrodistention; Intraarticular infiltration

Objective: The aim of our study was to assess the contribution of different therapeutic modalities in Physical Medicine and Rehabilitation for rapid improvement of adhesive capsulitis

Materials and methods: This is a retrospective study conducted during the period from January 2009 to March 2011 in the service of Physical Medicine and Rehabilitation in the Institute of Orthopaedics Kassab. Twenty-one cases of adhesive capsulitis, primitive (two cases) or secondary (four cases after shoulder trauma, one case after surgery of the rotator cuff, 11 cases due to diabetes, one case post-stroke and two cases of post-injury cap rotators) were included. The management has consisted in an intensive program of rehabilitation for two weeks, usually associated with complementary therapy by capsular distension or articular injection of corticosteroid. Treatment efficacy was assessed by VAS pain and the degree of joint mobility of the shoulder.

Second observation:– 62-year-old male admitted for a left knee operated on 29/09/2010 for tibial osteotomy, the radiographs of the knee after 6 months showed late healing with bone demineralization (CRPS type I). The two patients received treatment with bisphosphonates: intravenous Ibondonate (two cures 2 mg in 200 cc of serum to 1 month apart), they also received calcium and vitamin D supplementation. The outcome was favorable after 1 month with bone healing.

Conclusion:– Whatever the supportive care, the type of treatment used, and despite the measures of prevention, delayed healing is common after fractures of the tibia, the increased density of bone mineralization is proved after administration of bisphosphonates by inhibition of osteoclasts, but their effectiveness is unproven on bone healing.

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