

Physiotherapy Department

Acromioclavicular Joint Injury

The acromioclavicular joint (ACJ) is the joint between the collarbone (clavicle) and the shoulder (acromion). ACJ injuries are common. The most common mechanism of injury is a direct trauma to the outer aspect of the shoulder. The shoulder blade (scapula) is forced downwards, and the clavicle (collarbone) appears prominent.

The severity of injury to the joint can be classified by the amount of joint displacement and the degree of injury to the ligaments which support the acromioclavicular joint. The physiotherapist/clinician you see can discuss this further with you.



Typical symptoms following this type of injury include:

- Pain
- Swelling
- Bruising
- Difficulty moving the arm
- Deformity at the site of injury

Management of the injury is dependent upon symptoms such as persistent pain and functional limitations. Occasionally surgery may be required.

If you have been seen at A+E or minor injuries unit, you may be referred to the acute shoulder MSK clinic for further assessment and advice.



What should I do at home?

- Medications can be taken to help ease the pain and inflammation. Ask your GP or local pharmacist for advice.
- The use of ice can help with pain and inflammation. Use crushed ice cubes or a bag of frozen peas. Protect the skin from an ice burn by placing the ice pack in a wet towel. Leave in place for 10-15 minutes. It can be reapplied after 2 hours if you wish. It's normal for the skin to become pink with either heat or ice, however if you experience discomfort or a burning sensation remove the item immediately. Don't apply heat or ice packs if you have poor skin sensation or poor circulation, if you are diabetic or over areas of infection.
- Use sling for comfort only, wean from using the sling as soon as able.
- You should not drive whilst in a sling.
- You can return to work as soon as you are able to do your normal duties.

Early Exercises to help recovery

The hand, wrist, elbow and neck can be moved gently through their full range as comfort allows from day one of your injury. This will prevent stiffness developing in these joints while your shoulder is in a sling. Below is some guidance on the exercises you can do. All of them can be practised 3 to 4 times per day as pain allows.

Stage 1 exercises

Neck movements





1. Neck Rotation

Look over your left shoulder Pause at the end of range for few seconds to feel the stretch. Alternate by looking over your right shoulder.

Repeat 3-5 times.

2. Side Flexion

Take your ear towards your right shoulder whilst keeping your shoulder relaxed. Pause at the end of range feeling the stretch. Repeat on left side.

Repeat 3-5 times.

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Wrist/hand movements





Elbow range of movement





3. Finger flexion/extension

Practice making a fist and then open out your fingers.

Repeat 10-15 times.

4. Wrist flexion/extension

Move your wrist up and down.

Repeat 10-15 times.

5. Elbow flexion/ extension

Bend and straighten your elbow so you feel a mild to moderate stretch. You can use your other arm to assist if necessary. Do not push into pain.

Repeat 10-15 times.

2. Elbow supination/pronation

Put your elbow at your side. Bend it to 90 degrees. Slowly rotate your palm up and down until you feel a mild to moderate stretch. You can use your other arm to assist if necessary. Do not push into pain.

Repeat 10 -15 times.



6. Supported shoulder pendulum movement

Stand and lean forward supporting yourself with your other hand. Try to relax your injured arm and let it hang down.

Assist your arm to move slowly and gently fowards and backwards.

Assist your arm to move slowly and gently side to side.

Continue for approximately 1-2 minutes in total provided there is no increase in symptoms. Remember to try and relax your arm.

As the above exercises get easier and your shoulder pain starts to improve, you can try to progress some of the exercises to help regain range of movement and start to help build strength.

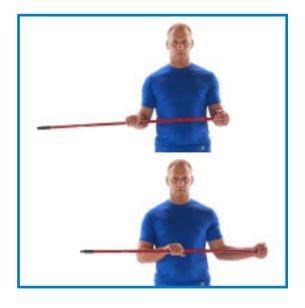
Stage 2 exercises



1. Assisted shoulder flexion

Use your other hand to lift your arm up in front of you as high as is comfortable.

Repeat 3-5 times.



2. Assisted shoulder internal/external rotation

Stand with your back against a wall and elbows bent to 90-degrees.

Hold a stick with your hands, use your good hand to push the other hand away from your body while keeping your elbow tucked in.
Push until you feel a stretch, hold for 30 seconds.

Repeat 3-5 times.

Progress to doing the above exercises unassisted as they get easier, and pain reduces.

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3. Isometric Shoulder External Rotation

Stand sideways on to a wall or solid surface and bring your arm up to a 90-degree bend. Push the hand and forearm into the wall whilst keeping your elbow pulled into your waist (use a towel under the arm if needed).

Repeat 3-5 times, Hold for 10 seconds.



4. Isometric Shoulder Extension

Stand with your back to a wall or solid surface and bring your arm up to a 90-degree bend. Push the elbow backwards into the wall without moving the rest of your body.

Repeat 3-5 times, Hold for 10 seconds.



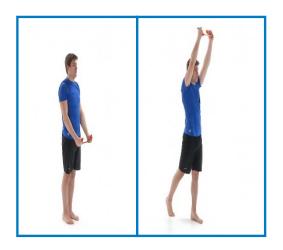
5. Isometric Shoulder Flexion

Stand facing a wall or solid surface and bring your arm up to a 90-degree bend. Make a fist and push into the wall whilst keeping the rest of your body still.

Repeat 3-5 times, Hold for 10 seconds.

Stage 3 - Exercise progression

As your shoulder pain and movement improves you can progress the exercises to include some strengthening. These can be performed 2-3 times per day as pain allows. As it starts to get easier you can increase the repetitions/ sets as able.



1. Band elevation with forward step

Stand up with a band around the wrists and elbows bent 90 degrees. Keep the band taut and raise the arms overhead as you take a step forward. Lower the arms and come back to the starting position.

Repeat 5-8 times.



2. Side lying weighted external rotation

Lie on your side with a weight in your top hand, elbow bent to 90 degrees. Place a rolled towel between your arm and your side. Rest your head on your free arm. Externally rotate the arm to lift the weight up. Keep your body still; do not turn the trunk to assist the movement.

Repeat 8-12 times.



3. Scapula stability exercises

Lie on your stomach, with your arms by your sides with palms facing up. Slowly lift your arms off the floor. Let your arms down slowly.



Lie on your stomach, arms to shoulder level, making a T shape. With the thumb facing upwards, arms to shoulder level, making a T shape, with the thumb facing upwards. Slowly lift your arms off the floor. Let your arms down slowly.



Repeat the movement 5-8 times.

Lie on your stomach with your arms overhead in a Y shape with thumbs pointing upward. Lift your elbows and hands off the floor while pulling your shoulder blades down and back. Let your arms down slowly.



Repeat the movement 5-8 times.

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4. Wall press

Stand at one arm's length from a wall.

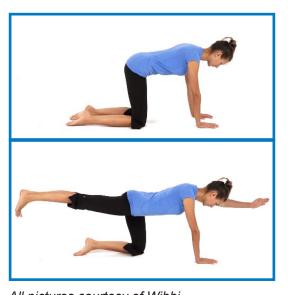
Increase the feet distance from the wall to increase the difficulty of the exercise. (You can the progress to a tabletop and then 1/2 to full press-up)

Place your hands on the wall.

Bend your arms and lean your upper body forward slowly. Straighten your arms and push your upper body back. Keep your body in a straight line.

Prevent your lower back from arching by lightly engaging the abdominals and by squeezing the glutes.

Repeat 8-12 times.



All pictures courtesy of Wibbi

5. Bird Dog

Get on your hands and knees (four-point position) with your knees directly under your hips and your hands directly under your shoulders.

Your back is in a neutral position (slightly arched) and your chin must be tucked in.

Tighten slightly your abdominals, lumbar muscles and pelvic floor muscles then lift one arm and the opposite leg without allowing the trunk or pelvis to move or rotate. Try to grab something far away in front of you with your hand and touch an imaginary wall far behind you with your foot instead of just lifting them up. Lower your leg and arm back to the floor.

Repeat with the other leg and the opposite arm Repeat 5-8 times.

Return to activity

As your movement improves and pain reduces, you can gradually increase the amount of weight that you are able to lift and activities you can do.

Return to sport or manual work is possible once the pain has settled, shoulder movements have returned to normal, and your strength has increased.

How long will it take to heal?

Most sprains heal without any problems within six to twelve weeks. However, it may take several months for your symptoms to settle completely – these can include pain or discomfort, stiffness, decreased strength and swelling. There may always be a slight 'bump' at the end of your collarbone at the site of the injury. The injury may take longer to heal if you suffer from diabetes or if you smoke.

If you have any worries or concerns, please contact the MSK Team on 01484 905380 if you are under their care or alternatively contact your GP practice for advice.

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Web Address:

http://www.cht.nhs.uk/services/clinical-services/physiotherapy-outpatients/patient-careinformation/

Or google "CHFT outpatient physiotherapy"

Or scan the QR code below to take you to our website.



If you have any comments about this leaflet or the service you have received you can contact:

Physiotherapy Department Huddersfield Royal Infirmary Telephone 01484 342434

MSK Physiotherapy Admin Office

Telephone 01484 905380

www.cht.nhs.uk

If you would like this information in another format or language contact the above.

Potřebujete-li tyto informace v jiném formátu nebo jazyce, obraťte se prosím na výše uvedené oddělení

Jeżeli są Państwo zainteresowani otrzymaniem tych informacji w innym formacie lub wersji językowej, prosimy skontaktować się z nami, korzystając z ww. danych kontaktowych

ਰ ਤੁਸੀਂ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਪ੍ਰਾਰੂਪ ਜਾਂ ਭਾਸ਼ਾ ਵਿੱਚ ਲੈਣਾ ਚਾਹੁੰਦੇ ਹੋ, ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਉਪਰੋਕਤ ਵਿਭਾਗ ਵਿੱਚ ਸਾਡੇ ਨਾਲ ਸੰਪਰਕ ਕਰੋ।

اگر آپ کو سے معلومات کسی اور فارمی طی خاربان می درکار ہوں، تو بر ائے مہربازی مندرجہ بالا شعبے می ہم سے رابطہ کری.

"إذا احتجت الحصول على هذه المعلومة بشكل مغاير أو مترجمة إلى لغة مختلفة فيرجى منك الاتصال بالقسم المذكور أعلاه"

