

Osteoarthritis of the elbow and shoulder

arthritis-uk.org



We are Arthritis UK

We're the 10 million adults, young people and children living with arthritis. We're the carers, researchers and healthcare professionals. The families and the friends. All united by one powerful vision: a future free from arthritis. So that one day, no one will have to live with the physical, emotional and practical challenges that arthritis brings.

There are many different types of arthritis. And we understand that every day is different. What's more, what works for one person may not help another. That's why our trusted information blends the latest research and expert advice with a range of lived experiences. In this way, we aim to give you everything you need to know about your condition, the treatments available and the many options you can try, so that you can make better-informed choices to suit your needs.

We're always happy to hear from you whether it's with feedback on our information, to share your story, or just to find out more about the work of Arthritis UK. **Contact us at healthinfo@arthritis-uk.org**

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What is osteoarthritis of the elbow and shoulder?

Osteoarthritis is the most common form of arthritis. It can affect any joint in your body, but the elbows and shoulders are less commonly affected than other joints.

Osteoarthritis develops when the joint's ability to repair itself becomes less effective. This can lead to changes that make the joint sensitive and painful. This doesn't necessarily mean that the condition will keep getting worse. Keeping active will help to keep your joints healthy.

A joint is a part of the body where 2 or more bones meet. The shoulder consists of two joints:

- a 'ball and socket joint' called the glenohumeral joint. The top of your upper arm bone is shaped like a ball and this fits into the shoulder blade bone, which acts like a socket. This gives your shoulder a wide range of movement.
- a smaller joint called the acromioclavicular joint, where your collarbone meets the top of your shoulder blade. This has a much smaller range of movement.

Osteoarthritis can occur in either joint but is more common in the acromioclavicular joint.

The elbow joint connects your upper arm bone, which is called the humerus, with the bones in your forearm, called the radius and ulna. The elbow is known as a 'hinge joint' because your elbow allows you to bend and straighten your arm. It also allows you to rotate your forearm and wrist.

Figure 1. Shoulder joint

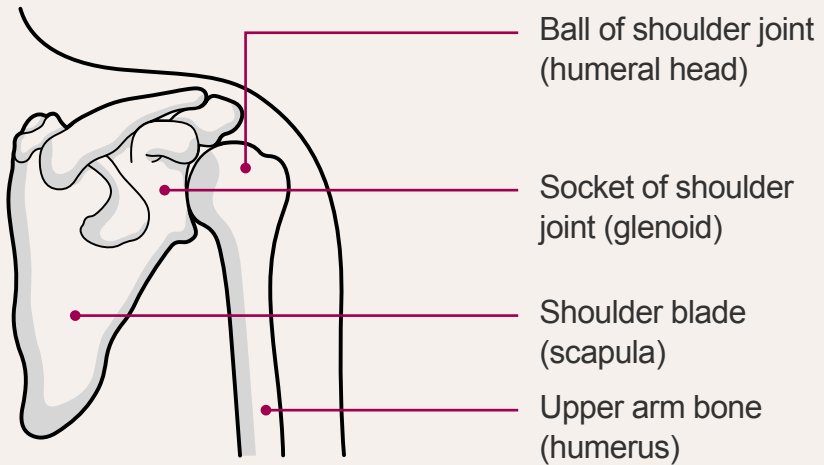
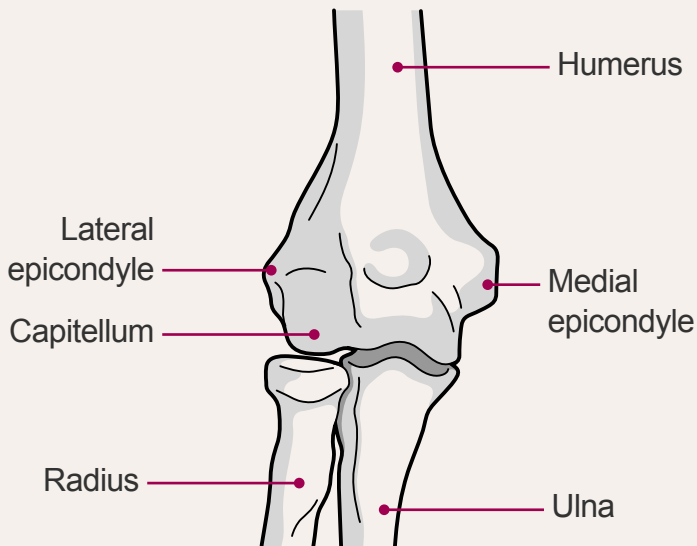


Figure 2. Elbow joint



The ends of the bones in the joints are covered with a smooth, slippery tissue, known as cartilage. This allows your bones to move smoothly against each other. In osteoarthritis, the cartilage in your joints becomes thinner and rougher.

Sometimes, when the repair processes become less effective, the cartilage cannot be fully restored. And sometimes the repair processes can result in changes to the shape or structure of your joint in ways that affect its movement. For example, bony spurs may form, changing the rounded shape of the bones.

The tissues within the joint may also become inflamed, which can cause pain and swelling.

Osteoarthritis is common and can affect people of any age, but it usually starts in people over the age of 45.

We don't always know why someone develops osteoarthritis, but we do know it isn't simply 'wear and tear'. There could be several factors involved – for example:

- the genes inherited from your parents
- a joint that's a slightly unusual shape – which you may have been born with
- previous injuries, especially broken bones
- jobs that put repeated strain on your elbows
- being overweight, which can increase inflammation and therefore pain.



For more information on this condition and how it's diagnosed, see the Arthritis UK booklet on **Osteoarthritis**. You can view all our information online at **arthritis-uk.org**

How will it affect me?

Not everyone with osteoarthritis of the shoulder or elbow will have symptoms. Those who do often find the symptoms vary. But there are treatments and things you can do to help manage your symptoms.

Osteoarthritis won't always affect both of your shoulders or elbows. It may only affect one joint.

You might find it difficult to bend or stretch your arm, and you may feel pain when you move your shoulder. This could mean that simple activities like shaving or brushing your hair suddenly become more difficult.

You might hear some crunching or cracking noises, called crepitus, especially when moving your shoulder. You may be very aware of these sounds because your shoulder is close to your ear. But it's not usually anything to worry about and can also happen in healthy joints.

Pain may feel worse at the end of the day or may depend on what you've been doing. Your shoulder or elbow might feel a bit stiff in the morning, but this shouldn't last more than half an hour.



Can there be complications?

It's unlikely that osteoarthritis of the elbow or shoulder will cause any serious complications. But in some cases, damage and swelling of the joint could put pressure on nearby nerves.

If this happens in your elbow, it could cause numbness or tingling in your little or ring fingers. This is known as cubital tunnel syndrome.

You should mention these symptoms to your doctor, as there are things they can do to help. In some cases, surgery may be needed to relieve the pressure on the nerves and treat your symptoms.



Managing osteoarthritis of the elbow and shoulder

There are treatments that can ease pain and improve your movement, but these are best used alongside self-management techniques such as keeping active.

Exercise

You may be worried that exercise might make things worse, but joints are designed to move. Keeping your muscles strong will help to support your joints and can reduce pain.

Whatever your fitness level, exercise or any kind of regular physical activity should be part of your treatment. Start off slowly and gradually increase how much you do. Exercising little and often is a good way to start.

There are 3 different types of physical activity that are good for osteoarthritis and your general health:

- **Range of movement exercises**, also called stretching exercises, help to improve movement and maintain the flexibility of your joints.
- **Strengthening exercises** will build up your muscle strength around your joints, so they are better supported and more stable.
- **Aerobic exercise** is important for your health and fitness, especially for your heart. Walking or cycling can help with shoulder pain too.

You should try to do at least 20 minutes exercise each day, building up to at least 2 and a half hours (150 minutes) of moderate aerobic activity every week. You should also try doing strengthening exercises 2 or more days a week.

Swimming can be a great exercise to try, as it increases muscle strength. Aqua aerobics, tai chi and Pilates are great if you want to improve your strength and range of movement.

The best exercise is something you'll enjoy and keep doing. Try a number of different things and see what works best for you.

If you're worried about starting new types of exercise, speak to a physiotherapist. They'll be able to give you tailored advice and start you on a personalised exercise plan. You may be able to refer yourself to physiotherapy or see a First Contact Practitioner at your GP's surgery.

You should also get advice from a physiotherapist if you enjoy exercise that puts extra load on your shoulders or elbows, for example lifting weights or racket sports.



See Arthritis UK's booklet on exercise **Keep moving**.
You can view all our information online at **arthritis-uk.org**

Diet

Keeping to a healthy weight is good for all your joints, including your elbows and shoulders. Although the shoulders and elbows may carry less of our weight than the hips and knees, being overweight can increase inflammation and therefore pain.

There's no specific diet that's recommended for people with osteoarthritis. However, if you could do with losing some weight, try to follow a balanced, reduced-calorie diet, combined with regular



exercise. Include plenty of fresh fruit and vegetables and try to cut down on fatty and sugary foods.



The NHS has a great weight loss plan that can help you lose weight in a healthy way: nhs.uk/better-health/lose-weight

You can also speak to your doctor for advice. The Association of UK Dieticians also has an informative leaflet on diet and OA. Find out more at: bda.uk.com/resource/osteoarthritis-diet.html

For more diet information go to our website: arthritis-uk.org/eating-well-with-arthritis

Reducing the strain

Generally, it's best to carry on with your usual activities as much as you can – but don't overdo it. You may need to pace yourself, take more rest breaks or switch between harder and easier jobs.

You should try to avoid carrying heavy or bulky items with your affected arm or shoulder.

Your posture can make a difference. So, make sure you're sitting comfortably and changing your position often at home or at work. Take frequent breaks from sitting and gently stretch your shoulders and arms.

When working at a desk, adjust your chair height, so that your arms and wrists are straight, making an L shape at the elbow. You can use a wrist rest to keep your hands level with the keyboard.

You might want to consider making changes to your home, car or workplace to reduce strain.

An occupational therapist can advise you on special equipment, like dressing aids, which can make everyday tasks much easier.



For more information on how to care for your joints go to our website arthritis-uk.org/joint-care

Coping with low mood and sleep problems

Pain linked to osteoarthritis can affect your sleep. This can lead to tiredness and could make your pain feel worse.

But there are things you can do for yourself that might help, such as:

- Avoid lying on the side of the affected arm. Instead lie on your back with a pillow supporting your arm.
- Sleep at regular times to help your body get into a routine.
- Avoid using mobile phones, laptops or computers before bedtime.
- Try to wind down before bed. You could have a warm bath or read a book.
- Keep a sleep diary to work out if there are any patterns to your sleep problems.

If you're in pain, and especially if it's affecting your sleep, you may feel anxious or depressed. If you're feeling low, your doctor may suggest cognitive behavioural therapy (CBT) or other stress-relieving techniques. The NHS also offers counselling sessions if you're living with chronic pain or long-term health conditions.





You could ask about being referred to a pain management clinic, which may help you manage your condition and help you keep doing the things that matter to you.

Pain management programmes can also help you develop skills and strategies to manage long-term pain and its impact on your life.

Why We Hurt is a programme offered by Flippin' Pain. It has videos, self-help resources and interactive tasks created by experts and those with lived experience to help you understand and manage your pain. It is free and available online.



You can find out more about how to manage fatigue, sleep and pain on our website arthritis-uk.org/managing-arthritis-pain, arthritis-uk.org/sleep and arthritis-uk.org/managing-fatigue

Pain medications

Medicines can help to ease the pain and stiffness caused by osteoarthritis, but won't treat the condition itself. Pain relief medicines are best used alongside other techniques to help you keep active.

Some of the available treatments include:

- **Non-steroidal anti-inflammatory drugs (NSAIDs):** NSAIDs are available as creams, gels or patches that you apply to the skin. Ibuprofen and diclofenac gels are available over the counter. Others, such as ketoprofen, require a prescription.

Creams, gels or patches can work well for some people. They are very safe and you may want to try these first, especially if you have trouble taking tablets.

A short course of NSAID tablets, such as ibuprofen, can help reduce pain, inflammation and swelling. Ibuprofen is widely available over the counter, but it's best to speak to a pharmacist to

make sure they are suitable for you. Stronger NSAIDs are available on prescription.

If you're taking NSAIDs for more than a couple of weeks, speak to your GP as you may need to be prescribed another tablet that helps to protect your stomach from side effects.



- **Painkillers:** Pain relief medications such as paracetamol may help some people. These aren't usually prescribed on the NHS but they are widely available over the counter. Some people find them helpful if taken just before exercising to ease any discomfort.

Your doctor may prescribe stronger pain relief medications, but usually only for short periods because of the increased risk of side effects.

- **Capsaicin cream:** This is a pain-relieving cream made from a natural substance found in chilli peppers. It may be available on prescription but availability may vary.
- **Steroid injections:** Occasionally, you may be offered a steroid injection into the shoulder or elbow joint. This can help reduce your pain for several weeks, but there are side effects too. Speak to your doctor or physiotherapist about whether this is the right option for you.

Repeated injections are not usually recommended as the benefit tends to last for a shorter time with each injection.

If you're taking any over-the-counter medications, make sure you're using them as directed by a pharmacist or according to the instructions in the leaflet that comes with the medicine.



See Arthritis UK booklets **Osteoarthritis, Painkillers and NSAIDs and Steroid injections.**

Other pain relief

You might also want to try some of the following to help with your pain:

- **Transcutaneous electrical nerve stimulation (TENS):** A TENS machine sends electrical pulses to the nerves through pads placed on your skin. This produces a tingling sensation and is thought to alter pain signals to the brain.

TENS is not usually available on the NHS. If you're unsure about buying a machine, a physiotherapist should be able to advise you.

- **Heat and cold therapy:** Ice packs and heat packs, such as a hot water bottle or a bag of frozen peas, can relieve some of the pain and stiffness in your elbows and shoulders. Be careful not to put ice or heat packs directly on your skin. Wrap them in a damp tea towel or cloth. You can use these for 20 to 30 minutes at a time every few hours.

- **Hyaluronic acid injections:**

Hyaluronic acid occurs naturally in the body and helps to lubricate joints.

These injections are unlikely to be available on the NHS, as they've not been proved to be an effective treatment for osteoarthritis. They may be available privately or occasionally as part of a clinical trial.



- **Supplements:** There's a wide range available, including fish oils, turmeric, glucosamine and chondroitin. The research evidence for some of these is limited, but some people do find them helpful.
- **Acupuncture:** This is a technique where very fine needles are inserted at specific points in your skin. There's no evidence that acupuncture is an effective treatment for osteoarthritis, but some people find that it helps them.

If you're interested in complementary therapies, remember that what works for 1 person may not work for another. If you think some of these treatments could be right for you, you could discuss them with your doctor or a pharmacist. They will be able to advise on whether they may interact with your medicines.

Complementary therapies aren't usually available on the NHS, so you will probably have to pay for them yourself unless you have private health insurance that covers them.



For more information on the treatments above, see Arthritis UK booklet **Osteoarthritis**.





Surgery

Most people with osteoarthritis won't need surgery, but it is an option if other treatments aren't working for you and pain is affecting your quality of life.

Shoulder and elbow joint replacements are very successful, but it may take several months before you feel the full benefit.

Before having surgery, you'll be involved in a shared decision-making process. You'll be able to discuss the options for your condition and the risks and benefits with a surgeon or an advanced physiotherapy practitioner.



You can view all our information on surgery online at [arthritis-uk.org](https://www.arthritis-uk.org)

Exercises

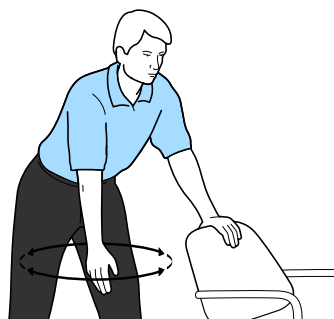
Try the exercises below. Start gently and build up gradually. Speak to a physiotherapist if you're struggling with any of them.

If you've had shoulder or elbow surgery, it's important to talk to your healthcare team about suitable exercises. Make sure to follow their advice before attempting these exercises for yourself.

Exercises for osteoarthritis of the shoulder

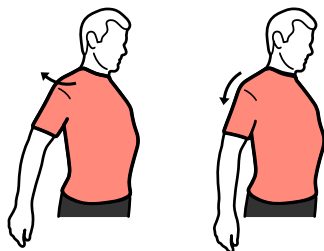
Shoulder circle

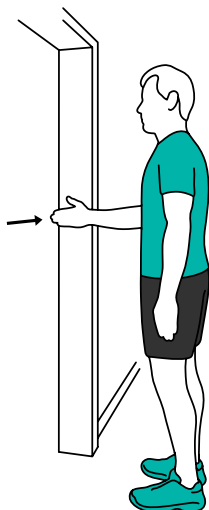
Stand with 1 hand resting on a chair. Let your other arm hang down and try to swing it gently backwards and forwards in a circle. Repeat this motion about 5 times and try to do this about 2 or 3 times a day. This can be a good warm-up exercise.



Shoulder stretch

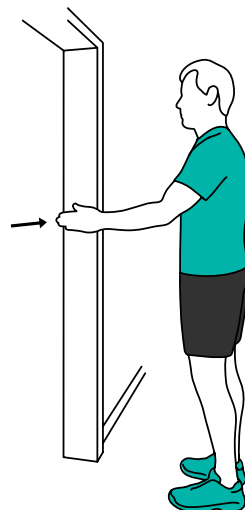
Squeeze your shoulder blades back and together and hold for 5 seconds. Pull your shoulder blades downward and hold for 5 seconds. Relax and repeat 10 times.





Door press (a)

Stand in a doorway with your elbow bent at a right angle and tucked close to your body. The back of your wrist should be pressed against the doorframe. Try to push your arm outwards, against the doorframe. Hold for 5 seconds. Do this 10 times on one side, then 10 times with your other arm on the opposite side of the doorframe. If you can, try to do 2 or more sets, so that you've done a total of 30 with each arm.



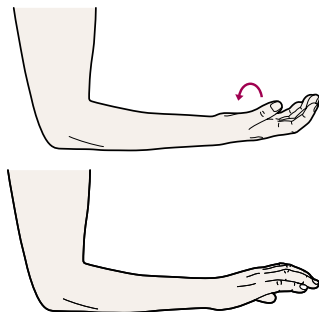
Door press (b)

This time start with the other arm, and with your elbow at a right angle, push your palm towards the side of the door frame that you used in part (a). Hold for 5 seconds. Do this 10 times on one side, then 10 times with your other arm on the opposite side of the doorframe. If you can, try to do 2 or more sets, so that you've done a total of 30 with each arm.

Exercises for osteoarthritis of the elbow

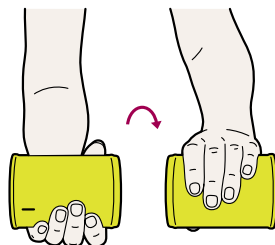
Wrist turn

Bend your elbow at a right angle and hold out your hand, palm up. Turn your wrist slowly so that your palm is now facing down. Hold for 5 seconds, and then slowly release. Try to do this a total of 30 times with a break after every 10.



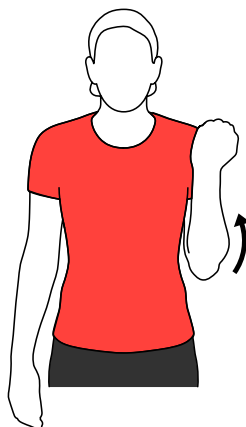
Wrist turn with weight

Repeat the exercise while holding a light weight, such as a tin of beans.



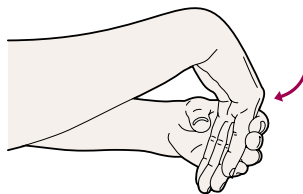
Elbow bend

Stand up straight and lower your arm to one side. Bend your arm slowly upwards so your hand is touching your shoulder. Hold for 15 to 30 seconds. Repeat 10 times. This exercise can also be done with a light weight.



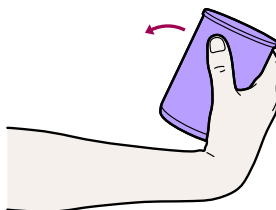
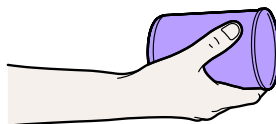
Wrist flex

Keeping your arm straight in front, with your palm facing down, gently bend your wrist down. Use the opposite hand to press the stretching hand back towards your body and hold for 15 to 30 seconds. Straighten your wrist. Gently bend the stretching hand backwards and use your other hand to pull the fingers back. Hold for 15 to 30 seconds. Do this 3 times with each wrist.



Wrist lift

Bend your elbow at a right angle. Hold a light weight, such as a tin of beans, with your palm facing upwards. Bend your wrist slowly towards you. Hold for 5 seconds, and then slowly release. Try to do this 30 times with a break after every 10.



Notes

Discover our support services

You don't need to face arthritis alone. Get the information, advice and support that you need.



Call our free helpline:
0800 5200 520



Connect with our online community, go to:
community.arthritis-uk.org



Chat with AVA, our online assistant, go to:
arthritis-uk.org/ask-AVA-our-virtual-assistant



Track your symptoms with our easy app, go to:
arthritis-uk.org/track-my-arthritis-symptoms-app

Thank you!

A team of people helped us create this booklet.

We would like to thank:

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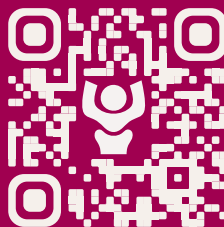
We would also like to give a special thank you to the people who shared their stories, opinions and thoughts on the booklet. Your contributions make sure the information we provide is relevant and suitable to everyone.



Support our work

At Arthritis UK we rely on donations to fund our work. Help support people with arthritis and fund life-changing research by making a donation today. Every contribution makes a difference.

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