

# Bursitis

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For some people, skeletal pain is the bane of life. Backaches, joint aches, and foot pain represent a large portion of the discomfort of human beings. Perhaps one of the most distressing of skeletal pains is that caused by bursitis.

Bursitis is an inflammation in a small fluid-filled sac located between movable parts of a joint, and sometimes between tendons and muscles. These little membranous bags are positioned in their locations around the shoulders, elbows, knees, and between large muscle groups in the arms, legs, and feet in order that they may cushion the contact between movable parts, allowing the movable parts to slip more easily against one another. The shoulder joint is most commonly affected by bursitis. Since women have sloping shoulders causing increased pressure on the bursae, allowing them to get irritated more, it is natural that women should suffer more bursitis. Heavy lifters and sedentary workers are more prone to get bursitis than active individuals who keep the muscles firm and the tendons healthy.

The shoulder bursa, located between the cup-like socket and the ball-shaped end of the arm bone, cushions this socket and absorbs shocks, preventing bruises. The bursa and its adjacent tendons can become inflamed, and the afflicted person cannot lift the arm straight out to the side or to the horizontal.

Injections should not be used for bursitis, nor should pain killers be used for any kind of chronic pain. Chronic pain can be handled in other ways that do not endanger the health of the person: Hot and cold applications, manipulation or exercise, massage, counter-irritation, and various plasters and poultices.

Prevention of any disorder is always the primary consideration. To prevent bursitis, avoid excessive fatigue, particularly by such activities as carrying heavy handbags, buckets of paint, or suitcases over long periods. Any repetitive motion such as painting, wallpapering, window washing, or other long-continued unaccustomed activity can bring on bursitis.

Two types of treatment are necessary, and should be engaged in promptly and enthusiastically by the patient. The first is that of an ice pack. Apply the ice pack to the shoulders for 6 to 10 minutes, until sufficient anesthesia results to enable the person to move the arm more freely, at which time exercises should be engaged in as listed at the end of this article. The ice pack is the first line of treatment, given during the first week of pain and discomfort. After the first week, hot packs, followed by brief cold should be given daily until the pain subsides. Thick steam packs made from wool if available or large Turkish towels, dipped in hot water and wrung dry, should be applied continuously for 45 to 60 minutes, changing the pack as it cools. At the end of the time, rub the treated area with an ice cube for 50 seconds. Unless the person has hardened calcium deposits,

this treatment should be effective, if the person will persist in the treatment for a sufficiently long period of time. The hot packs must be given daily, and must be intense. The maximum tolerable heat is necessary to sufficiently warm the bursa for healing. After one hour of the hot packs and the ice rub, a brief cool shower should be taken to close off the pores and reduce sweating.

Exercise for bursitis is extremely important to prevent a "frozen shoulder." During the early phases, the cold will enable the person to have sufficient freedom from pain to engage in the exercises. With the heat treatments, the inflammation should reduce sufficiently to allow exercising the extremity.

Let the person lean forward and to one side with the affected arm hanging down, holding onto a cable or desk with the opposite arm. This pulls the head of the arm bone away from the bursa. By a body movement, cause the hand to swing in a small circle. Gradually increase the size of the circle as far as it can be done without pain. Day-by-day make the circle wider as the pain recedes and the joint becomes more flexible. Two minutes at a time is probably enough and it can be repeated several times daily. A frozen shoulder will not result when this exercise is faithfully followed.

Avoid chilling the extremities. Notice particularly the clothing of the shoulders during the night, as the shoulders can become uncovered in bed and chilled. Wear warm sleepwear. Do not begin heavy work until you have "warmed up" by doing some light work. Do not use deep massage for bursitis as it can increase inflammation. Do not prolong inactivity in bursitis, as a stiff joint may result, but two or three days of wearing a sling may decrease the inflammation.

Exercises may be done comfortably after any hot or cold treatment:

1. Wall Walking Exercise. Face the wall at arm's length, lean your hands into the wall, and start slightly above the waist with a walking movement, hand-over-hand as high as you can reach without pain. Try to increase the position of the arm on the wall each day. Repeat the exercise four times daily.
2. Slowly extend the arms back and up, then forward and up, then outward and up. Repeat this exercise for five minutes once or twice daily.
3. Rig an overhead pulley with a 5-pound weight on a rope, preferably out-of-doors, and pull down on the rope and then allow it to pull the arm up as far as it will go. Start out with 5 pulls three times a day, and gradually work up to 50, three times daily.

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