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Correcting Rotator Cuff Problems

By Nancy Botting



Are you one of the many active middle agers suffering from chronic shoulder pain with no known cause? Do you experience pain and tenderness in your shoulder while reaching overhead, reaching behind your back, lifting, pulling or while sleeping? Perhaps it is not significant enough to stop your favorite outdoor activity, but the discomfort is ongoing enough to affect the enjoyment of your passion for activity. Or you are a swimmer or triathlete whose shoulder is limiting advancement in the pool?

The “Rotator Cuff” is a group of four small muscles that first work to stabilize the ball of the shoulder joint in the socket of the shoulder blade, and secondly work to rotate the shoulder in a variety of planes of motion. If the ball of the shoulder joint is not stabilized well within the socket, the rotation motion of the shoulder girdle will be affected and bigger muscles will take over the motion causing dysfunctional movement and will lead to a variety of overuse or “tendonitis” type injuries.

Three of the four rotator cuff muscles originate on the surface of the scapula and the fourth from the underneath surface, all wrapping around the upper part of the arm (humerus) to attach onto the front of the upper arm. So the rotator cuff connects the scapula to the humerus and this combination results in the greatest range of motion of any joint in the body. The shoulder has up to 270 degrees of free motion making it highly susceptible to injury.

The scapula bone floats over the rib cage and its resting position and mobility are affected by a total of 17 muscles that connect to it. This makes it truly the foundation of your shoulders and the base of every arm motion that you make.

So ... perhaps the “rotator cuff” pain that you are experiencing is the purely the symptom and the dysfunctional scapular position the “cause”?

Healthy shoulder blades seem to be a rarity in our sitting-craved society. In my experience, one of the leading causes of most shoulder injuries is the poor posture that we assume during the time that we spend sitting in front of our computers or driving our cars. The slouched position encourages the shoulder girdle to round forward leading to an excessive rounding of the upper spine and a tilting forward of the scapula. Both

reduce the space for the rotator cuff muscles when the arm is lifted overhead, pinching the tendons and causing repeated micro-trauma to the tendons.

The result? Impingement resulting in shoulder pain.

To improve your shoulder health, the best advice I can give you is to work on exercises that improve your posture and scapular position. Focus on the mobility of your upper back as well as strengthening the muscles that stabilize and externally rotate the scapula.

EXERCISES SUCH AS:

Posture Check – Stand with your back to the wall, heels as close to the baseboard as possible. Place your arms in a “stick ‘em up” position (elbows bent) resting against the wall. If you cannot comfortably rest your forearms and hands on the wall, your rotator cuff and scapular position are altered. Your upper spine may be stuck in a forward and rounded position. Work on allowing your body to adjust to this position by attempting to slide your arms up the wall for eight to 10 repetitions.

Planking (on hands or elbows) - Works to stabilize the ball of the shoulder within the socket. Hold a static plank for 30-90 seconds to improve the endurance of your scapular stabilizers. Progress to 60 seconds of alternate movement between hand and elbow support.

In the Gym - Avoid exercises such as Chest Flies and Bench Press which isolate the anterior chest muscles pulling the shoulders further forward. Focus on rowing motions such as Seated Row, One Arm Row and Reverse Flies.

Most shoulder injuries if caught early enough can be cured with corrective exercises. The key is to have an assessment by a sport medicine professional to isolate your areas of weakness and to work on balancing the shoulder blade position.

Your shoulders will thank you!

NANCY BOTTING is a Registered Physiotherapist with a Diploma in Sport Physiotherapy. She was a member of the Canadian medical team for the Atlanta Olympic Games, Athens and the Beijing Paralympics. This summer she is heading to London as part of Canada’s medical team for the 2012 Paralympic Games. She loves spending time outdoors with her husband Chris and two kids. She also competes in outrigger canoe racing. Physical Edge Physiotherapy is located in Oakville, Ontario. www.physicaledgephysio.com



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