

Cycle 3- Shoulder
2309 - Understanding Shoulder Instability
SCRIPT

(1)

GEOFFREY GRIFFITHS, MD:

Shoulder instability, at its most basic, is a loose shoulder; a normal shoulder actually does already have some looseness to it. That allows us to put that hand into space and position it in any position we need it to.

(2)

GEOFFREY GRIFFITHS, MD:

But of course if there's too much motion, that's gonna become a problem. And that's when we diagnosis-- an unstable shoulder or give the person a diagnosis of shoulder instability.

(3)

BRENT DAVIS, MD:

Shoulder instability is when the ball and socket joint or the glenohumeral joint of the shoulder is-- allowing more motion than-- is appropriate or typical.

(4)

BRENT DAVIS, MD:

In a normal shoulder that ball and socket rotate, but the-- humeral head, or the ball, stays on top of the socket. So it's sort of like a golf ball sitting on a golf tee. Shoulder instability is when the ball either comes off the socket or moves too much and comes almost outta the socket.

(5)

GEOFFREY GRIFFITHS, MD:

Actually a loose shoulder helps-- athletes in certain sports. If there's too much looseness, if there's pain, if there's dysfunction, then of course shoulder instability is a problem.

(6)

BRENT DAVIS, MD:

There are other forms of instability as well. One is called multi-directional instability. That's instability that-- you're born with, where your tissues are more lax or loose than typical.

(7)

BRENT DAVIS, MD:

And sometimes it will actually lead to-- a dislocation where the ball and socket actually come outta place. The third type of instability is often referred to as acquired instability or micro-instability, and we believe that that really comes-- about as a result of playing sports, a lot of times overhead activities.

(8)

GEOFFREY GRIFFITHS, MD:

There is something called traumatic shoulder instability. And that is after a person suffers a specific injury.

(9)

GEOFFREY GRIFFITHS, MD:

There's also what's called atraumatic shoulder instability. And that's more of a gradual process that's not one specific injury, but building up over a period of time.

(10)

BRENT DAVIS, MD:

In general, somebody who comes in with a loose shoulder or a lax shoulder, we try three to six

months of nonoperative treatment before we really consider doing anything surgical.

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