**Cycle 5**
**2508 - Understanding Shoulder Dislocation**
**SCRIPT**


**(1)**
**BRENT DAVIS, MD:**
If you dislocate your shoulder, most people actually have a sense that the shoulder is out of place. They will certainly feel something very abnormal, and oftentimes they can tell that the ball is, or humeral head, is not where it's supposed to be.

**(2)**
**GEOFFREY GRIFFITHS, MD:**
Shoulder dislocation is actually when the ball separates from the socket.

**(3)**
**BRENT DAVIS, MD:**
Sometimes the patient is able to do it on their own, sometimes it comes back in by itself. But in many cases it's stuck out of place until a physician or another medical professional can put it back into place.

**(4)**
**GEOFFREY GRIFFITHS, MD:**
Now a full dislocation means that it is off, out of position, often can't be put back into position until a person goes to the emergency room under some sedation, actually formally puts it back into place.

**(5)**
**GRANT FUHR:**
First shoulder that I managed to dislocate was 1981. I dislocated my right shoulder that summer.

**(6)**
**BRENT DAVIS, MD:**
Once it's back in place, the question is whether it's going to continue to come out of place now, because the initial injury can make it more unstable or more likely to come out of place.

**(7)**
**GRANT FUHR:**
I think by the time I finally had my first surgery, it had dislocated seven or eight times.

**(8)**
**BRENT DAVIS, MD:**
That shoulder is now more likely to dislocate after that injury than it was prior to that injury. That's because there's a structure in the shoulder called the labrum. It's a ring of tissue that makes the socket more of a cup. After the first dislocation, that labrum is often torn. When the labrum is torn, if it doesn't heal correctly, that makes the shoulder more prone to dislocate in the future, now with just normal activities, not necessarily an injury.

**(9)**
**GRANT FUHR:**
They decided that they were going to bolt it back together again and finally get the shoulder back to being functional again.

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