

AC (ACROMIOCLAVICULAR) SEPARATION ***(SEPARATED SHOULDER)***

DESCRIPTION

Sprain (partial or complete tear), injury or inflammation of the ligaments on the top of the shoulder where the collarbone (clavicle) attaches to the roof of the shoulder (acromion). The structures involved are the acromioclavicular (ac) and coracoclavicular (cc) ligaments. These ligaments attach the clavicle to the acromion (roof of the shoulder that is part of the scapula - shoulder blade) or coracoid (part of the scapula).

FREQUENT SIGNS AND SYMPTOMS

- Tenderness and swelling or bump on top of the shoulder (at the AC joint)
- Bruising that appears at the site of injury and sometimes the chest (usually within 48 hours)
- Loss of strength and/or pain with attempting overhead activities or reaching across the body.

CAUSES

- Usually due to impact or falling on the tip of the shoulder.
- Falling on an outstretched hand or on the tip of the elbow.

RISK INCREASES WITH

- Sports that require contact or collision, and throwing sports, racquetball and squash.
- Poor physical conditioning
- Previous shoulder sprain or dislocation
- Inadequate protective equipment

PREVENTIVE MEASURES

- Proper protective equipment fit
- Proper technique / coaching (including falling/landing)
- Taping, protective strapping or padding, or an adhesive bandage may be recommended before practice or competition

EXPECTED OUTCOME

- Usually symptoms curable with appropriate treatment
- It is important to allow adequate healing time before resuming activity and with proper rehabilitation, permanent disability can be avoided without surgical intervention.
- Healing time varies with type of sport and position, arm injured (dominant versus non-dominant) and severity of sprain.

POSSIBLE COMPLICATIONS

- Weakness and fatigue of the arm / shoulder (uncommon)
- Continued pain and inflammation of the AC joint
- Prolonged healing time if usual activities are resumed too early and susceptibility to recurrent injury

GENERAL TREATMENT CONSIDERATIONS

Initial treatment consists of medication and ice to relieve pain, stretching to prevent shoulder stiffness, and modification of activities to allow the ligaments to heal. Treatment options include surgical and non-surgical intervention. Return to sports activity is much earlier with non-operative treatment and is based on type of sport and position, arm injured (dominant versus non-dominant) and severity of sprain. Surgical intervention requires 4 to 6 months to return to sports.

- *Non-surgical treatment* usually is recommended and is successful with full return to activity and no loss of strength for most sprains of the AC joint. A sling is usually prescribed initially for comfort.
- *Surgical treatment* is usually reserved for those with severe sprains, particularly for those who are heavy laborers, throwing athletes, or those who have failed 2-6 months of conservative treatment.

MEDICATION

- Non-steroidal anti-inflammatory medications, such as aspirin and ibuprofen (do not take if surgery planned in 7 days or less), or other minor pain relievers, such as acetaminophen are often recommended. Take these as directed by your physician. Contact your physician immediately if any bleeding, stomach upset or an allergic reaction occurs.
- Topical Ointments may be of benefit.
- Pain relievers may be prescribed as necessary by your physician. Use only as directed and only as much as you need.
- Injections of corticosteroids may be given to reduce inflammation, though not usually for acute injuries. Injections of long-acting local anesthetic is not usually given.

HEAT AND COLD:

- Cold is used to relieve pain and reduce inflammation for acute and chronic cases. Cold should be applied for 10 - 15 minutes every 2-3 hours for inflammation and pain, and immediately after any activity which aggravates your symptoms. Use ice packs or an ice massage.
- Heat may be used prior to performing stretching and strengthening activities prescribed by your physician, physical therapist or athletic trainer. Use heat pack or a warm soak.

NOTIFY OUR OFFICE IF

- Pain, swelling, or bruising worsens despite treatment
- You experience pain, numbness, or coldness in the arm.
- Blue, gray or dusky color appears in the fingernails
- New, unexplained symptoms develop. Drugs used in treatment may produce side effects.