

Shoulder Dislocations in the Athlete

Michael L. Nguyen, M.D.

Shoulder dislocations are one of the most common problems in our young athletes. Based on data from the NCAA Injury Surveillance System, the highest rates of shoulder dislocations were in contact sports such as football, hockey, and wrestling. On average, an athlete loses 10-12 days of sport after this injury. While shoulder dislocations can be life-changing injuries, if properly treated, most players are able to return to the sports they love. Athletes such as Drew Brees, Dwayne Wade, Candace Parker, and Derek Jeter all suffered shoulder dislocations but were able to come back and thrive at their respective sports.

The shoulder is a ball and socket joint with a very shallow socket, similar to a golf ball on a tee. This is beneficial in that it allows a large range of motion, but it can be detrimental as it gives the shoulder less stability. In fact, the shoulder is the most common joint dislocated in the body. Much of the stability of the shoulder is due to the ligaments and muscles around the shoulder. Most important is a group of muscles called the rotator cuff. It is a group of four muscles that wrap around the ball and provide motion, strength, and stability to the shoulder.

If a player suffers a shoulder dislocation on the field, this can usually be put back in place with gentle manipulation. Most athletes will feel a remarkable decrease in their pain once the shoulder is back in place, but some soreness may develop for the next 3-10 days. Your doctor may prescribe anti-inflammatory medications or muscle relaxers to help with the initial pain. A sling should be used for 3-7 days based on symptoms, and early rehabilitation should be implemented to maintain pain-free motion and to strengthen the rotator cuff to help provide stability.

When I see an athlete in my clinic after a shoulder dislocation, there are three questions that are most paramount to how the player is treated:

1. What is the age of the patient?
2. What sports does he/she play?
3. How many times has this happened?

The two most influential factors influencing whether an athlete may suffer a recurrent dislocation of the shoulder are age and sport. Younger athletes and ones that participate in high-risk, collision sports such as football, lacrosse, and snowboarding are at greatest risk of future dislocations. As long as there are no fractures on x-ray, most athletes who are first-time dislocators can be treated without surgery. A good rehabilitation program focused on strengthening the muscles around the shoulder (including the rotator cuff) as well as core strengthening and balance training can often prevent another dislocation from occurring. For certain sports, such as football, a motion-limiting brace can be worn that will help give stability to the shoulder. If an athlete has dislocated multiple times, then rehabilitation may not be enough to regain stability. Each dislocation of the shoulder stretches the structures in the shoulder that give stability further and further, and eventually these structures become incompetent. If this occurs, a minimally invasive surgery to repair these structures can be performed. Afterwards, our athletes undergo a sport-specific rehabilitation program to focus on his/her individual needs. Surgery will usually sideline the player for 6-9 months, but afterwards it should give him/her a stable shoulder to perform with.

Shoulder dislocations are difficult, painful injuries that can really limit an athlete. They are unfortunately all too common in sports, and the numbers will likely increase as athletes become faster and stronger. It can be a life-altering injury, but if treated properly, it can be just another hurdle a motivated athlete overcomes on his/her way to a successful athletic career.

We are fortunate in our community to have many places to turn for orthopedic care. When seeking medical treatment for knee pain, be sure to select the physician who is most highly qualified through advanced training in the latest techniques and in experience. Take time to ask about medical school education, areas of specialization, residency training, and experience with your particular issue. Dr. Michael Nguyen is a board eligible orthopedic surgeon that is fellowship trained in sports medicine and arthroscopic injuries of the shoulder, knee, and hip. Dr. Nguyen is on staff at Texas Health Harris Methodist Hospital Southlake, Texas Health Harris Methodist HEB, and Baylor Regional Medical Center at Grapevine.



2425 Hwy 121 Bedford, TX 76021
817-540-4477
www.txortho.net