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## Arthrographic hydrodilatation for adhesive capsulitis (Frozen Shoulder)

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### Record Status

This is a bibliographic record of a published health technology assessment. No evaluation of the quality of this assessment has been made for the HTA database.

### Citation

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### Authors' conclusions

Adhesive capsulitis, also known as frozen shoulder, is one of the most common causes of shoulder pain and stiffness, affecting 2% to 5% of the general population. The condition is characterized by spontaneous onset of pain and progressive stiffening of the glenohumeral (shoulder) joint, causing limited mobility and disability. Although the condition is often self-limiting, with a few patients experiencing spontaneous recovery, up to 40% of patients have persistent symptoms and experience restricted movement for more than 3 years, and 15% of affected patients have a persistent disability. The etiology and the pathophysiology of idiopathic adhesive capsulitis are not well understood. There is no standard therapy for restoring motion and reducing pain in patients with adhesive capsulitis. Current treatment includes exercise, physical therapy, glucocorticosteroid injections, oral corticosteroid treatment, manipulation under anesthetic, and arthroscopic release in refractory cases. However, there is no clear evidence of the efficacy of these treatment options for improving pain and function or for changing the natural progression of adhesive capsulitis.

### Final publication URL

The report may be purchased from:<http://www.hayesinc.com/hayes/crd/?crd=13307>

### Indexing Status

Subject indexing assigned by CRD

### MeSH

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### English summary

An English language summary is available.

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