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Chronic Pain Management

(MSP, expedited WCB, ICBC and
private consultations)

Cortisone injections:

Epidural Steroid Injections (Back or Neck)
Knee or Hip or shoulder joints

Baker's cyst
Trigger points/myofascial

Carpal Tunnel

Tennis elbow

Botox/migraine

NOT FOR THIRD PARTY RELEASE UNLESS AUTHORIZED

Shoulder Pain

Rotator Cuff Tendinosis/Bursitis is a common painful condition which usually occurs due to degeneration of the rotator cuff muscles and tendons. This occurs often in your 40's to 60's, or secondary to an injury/trauma of the shoulder.

There are four muscles which comprise the rotator cuff of the shoulder. The muscle most often injured is the supraspinatus. Patients have trouble sleeping, lifting their arm, washing their hair, taking their shirt/jacket off, reaching backwards and for women doing their braier.

The X-ray of the shoulder is often normal, or sometimes it may show calcium deposits.

The treatment is usually over the counter acetaminophen (Tylenol) or anti-inflammatories such as ibuprofen (Advil). Rest and physiotherapy are also possible treatments. Strong pain medications containing narcotics are usually best avoided if at all possible.

If severe pain continues, a cortisone injection can help decrease the pain and inflammation so that patients can continue with range of motion exercises (ROME). This is very important as ROME will prevent stiffness which can lead to frozen shoulder (Adhesive Capsulitis).

The actual injection is no more painful than an immunization or flu shot and takes only 5 seconds to do. Using sterile technique, a very small needle is used to inject some freezing (local anesthetic-lidocaine) and cortisone (Depo-Medrol) into the tip of shoulder (subacromial bursa). Hopefully, this treatment should decrease the inflammation and severe pain around the rotator cuff and with ongoing ROME prevent stiffness.

A small bandage will be placed over the injection site. For the first one to three days, the shoulder may feel achy/hot. Pain medications as above and ice can help.

Side effects are uncommon, however, infection or bleeding can occur. Actual rupture of the tendons/muscle is a rare, but known complication. This is usually quite a safe procedure.

Many doctors can perform this procedure: Family Doctors, Orthopedic surgeons, Emergency Doctors, and Pain specialists.