**Title:** Shoulder Dislocations: What Are They? How Are They Treated? And How to Prevent Them?

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**Abstract:**
Surgical repair of acute shoulder dislocations reduces the risk of future shoulder dislocations versus non-surgical therapy in young and active patients.
**Prevention**

- After a shoulder dislocation, patients are at higher risk for dislocating the shoulder again.
- Increased risks for recurrent dislocation include:
  - Patient’s age (younger than 30)
  - Involvement in contact sports
  - A job that requires the person to lift or use his or her arms at or above shoulder level often.

**Treatment Options**

- The most conservative option for treatment involves immobilization with a sling often followed by physical therapy.
- Patients at high risk for recurrent dislocation may benefit from surgical repair of the shoulder.
- Surgical repair for these patients has been shown to reduce the risk of future dislocations over non-surgical treatment alone.

**Surgery Options**

- There are a variety of methods used for surgical repair for shoulder dislocations including arthroscopic, a minimally invasive repair, or open surgical repair. These options may be discussed with your doctor.

**Shoulder Dislocations:**

What Are They?
How Are They Treated?
And How to Prevent Them?

**Notes**

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**Sources**


What is a shoulder dislocation?
A shoulder dislocation is an injury that occurs when the upper arm bone (the humerus) loses contact with the socket of the shoulder blade (the scapula).

The shoulder joint can dislocate forward, backward, or downward. A common type of shoulder dislocation is when the shoulder slips forward (anterior instability). Shoulder dislocations generally occur during injuries from falls, contact sports, or motor vehicle accidents.

Signs and Symptoms
• Patients usually have significant shoulder pain associated with a dislocation.
• Visibly deformed or out of place
• Swollen or discolored

Diagnosis
• Diagnosis of a shoulder dislocation is usually apparent by examination of the shoulder.
• Examination includes checking for any nerve or blood vessels before the arm is put back in place (reduced).
• X-rays are often done to check for any fractures at the joint and to determine the pattern of dislocation.

Initial Treatment
• Shoulder dislocations are usually reduced, where the arm is put back into the correct position, in the emergency department. Medication may be given for pain management during the reduction.

The arm is reexamined for damage to the blood vessels or nerves and then usually placed in a sling.

Complications
• Nerve or blood vessel damage
• Fracture
• Soft tissue damage
• Recurrent dislocations