

Managing shoulder pain

Practical tools and techniques
to help you lead a fulfilling life

Important Information

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Introduction

Shoulder pain is common and can be brought on by the repetitive tasks or postures to which we regularly expose our bodies.¹

Pain is frequently felt in the upper outer arm as well as around the shoulder joint. The shoulder structures may be the source of this pain but it can be referred from other regions, for example the neck.

In this booklet you will find some information to increase your understanding of shoulder pain as well as some tools and techniques you can do to ease the problem and improve your health and wellbeing.

While this information may help you, it is not a substitute for medical advice and it is important for you to maintain an ongoing relationship with your doctor, any medical specialists you may have and any other health professionals that are within your medical team.

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Understanding the shoulder

The shoulder is a ball-and-socket joint formed by the head of the humerus (the arm bone) and the glenoid labrum (the name for the socket of the shoulder joint in the scapula).

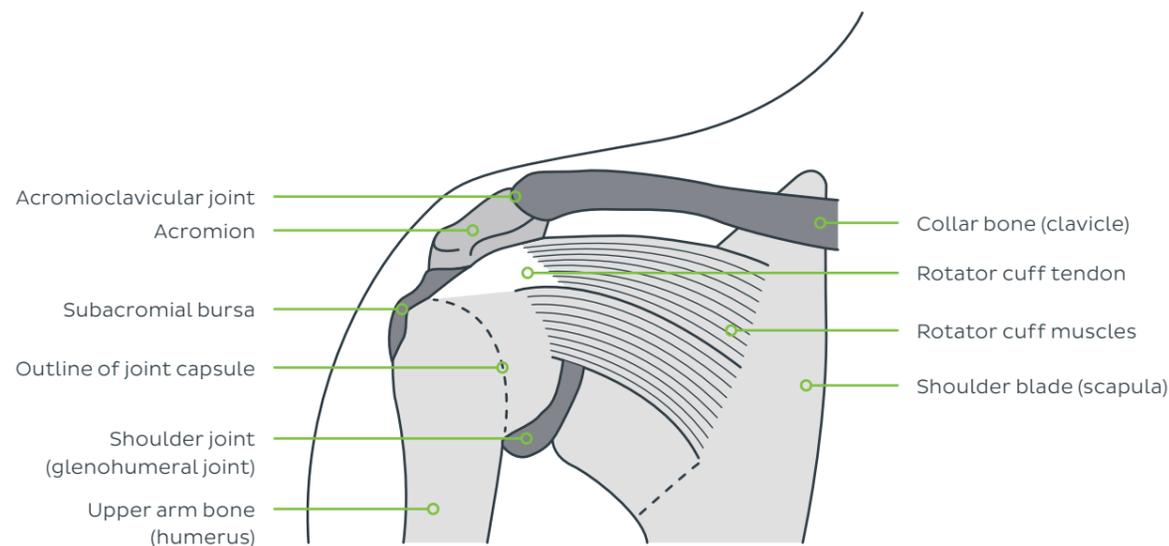
The shoulder joint is very mobile, allowing great freedom of movement for the arm (much more than the equivalent joint in the hip). This greater mobility means that the shoulder joint is less stable.

The stability of the shoulder joint relies a lot on the 'rotator cuff muscles' – four muscles (supraspinatus, infraspinatus, subscapularis, teres minor) inserting around the shoulder joint that help move it, as well as providing stability. These muscles are a common source of pain.

The shoulder joint is also surrounded by a tough fibrous sleeve, called the capsule, which helps to hold the joint together. The inner layer of the capsule (the synovium) produces a fluid which nourishes the cartilage and lubricates the joint.

The shoulder is a complex, highly mobile structure made up of several components. There are two joints:

- **Glenohumeral joint** – where the upper arm bone (humerus) connects with the shoulder blade (scapula)
- **Acromioclavicular joint** – where the top of the shoulder blade meets the collarbone (clavicle).



What is shoulder pain?

Shoulder pain is pain that is felt in the shoulder area, at the top of the arm. It is a sign that the joints, muscles or other parts of the shoulder are injured, strained or not working properly.

SHOULDER CONDITIONS ARE AMONG THE MOST COMMON MUSCULOSKELETAL PRESENTATIONS SEEN BY GENERAL PRACTITIONERS IN AUSTRALIA²

Signs to look out for

You should make an appointment with your doctor if:

- You have severe pain, especially after a definite injury
- You have severe pain or stiffness in both shoulders
- The pain is present day and night and is constant
- You experience rapid onset of pain with fever or feel generally unwell

If you are experiencing any of these symptoms, seek medical advice.

Causes of shoulder pain

Pain in the shoulders has many different causes. The pain may occur in the joint itself, or in the many muscles, tendons and ligaments in the shoulders.

The causes of shoulder pain include general wear and tear with increasing age; arthritis; overuse; falls and poor posture.

There are several other possible causes of shoulder pain, including:

- Inflammation or damage to the muscles and tendons around the shoulder
- Inflammation in the sac of soft tissue (bursa) that normally allows the muscles and tendons to slide smoothly over the shoulder bones
- Damage to the bones and cartilage, which can be caused by arthritis
- Referred pain coming from other structures. The joints, nerves, muscles and ligaments in the neck can refer pain to the shoulder area. Nerve pain can make your arm and shoulder blade achy and heavy; pins and needles can develop in your arm and hand. Muscle pain as a result of tension, stress and repetitive tasks or postures can lead to pain and stiffness in the shoulder.



DID YOU KNOW?

Rotator cuff tears are the most common cause of shoulder pain and disability in adults. Other common causes of shoulder pain include osteoarthritis, tendinitis, impingement, shoulder instability or a fracture.¹

Specific shoulder conditions

Shoulder pain is a common problem with a number of different causes. Some of the specific conditions that affect the shoulder include:

Adhesive capsulitis (frozen shoulder)

Frozen shoulder, also known as adhesive capsulitis, is a painful persistent stiffness of the shoulder joint that makes it very difficult to carry out the full range of normal shoulder movements.

Frozen shoulder occurs when there is thickening, swelling and tightening of the flexible tissue that surrounds the shoulder joint. This leaves less space for your upper arm bone (humerus) in the shoulder joint, and makes movement stiff and painful.

You may find it difficult to carry out everyday tasks such as dressing, driving and sleeping comfortably. The symptoms of frozen shoulder can vary greatly, but tend to advance slowly. They are usually felt in three stages spread over a number of months or years.

Osteoarthritis

Osteoarthritis is a common condition which can affect any joint³. When it affects the shoulder it may be in either the glenohumeral or the acromioclavicular joint. It may result from previous injuries or abnormal stresses. The cartilage becomes thinner and spurs of extra bone (osteophytes) may form which alter the shape of the joint and affect how it moves. It's likely to cause pain and a reduction in the movement of the shoulder. If the acromioclavicular joint is affected, the pain may be noticeable when you stretch across your body, reach up high above your head or when you lie on the affected site.

Rheumatoid arthritis

This is an inflammatory disease which typically affects the hands and feet but can affect the shoulders. The inflammation affects the lining of the joint capsule (synovium) but may, after a period of time, cause damage to the cartilage, bones and ligaments.

PREVENTION OF SHOULDER PAIN

You may be able to prevent some shoulder pain by:

- Staying in good physical shape
- Being aware of your posture and how you perform activities
- Warming up before exercise and stretching after exercise
- Lifting and carrying heavy items correctly
- Taking breaks, stretching and relaxing.

Rotator cuff disorders

The rotator cuff is the group of muscles and tendons that surround the shoulder joint. Tendons are the tough, rubbery cords that link muscles to bones. The rotator cuff keeps the joint in the correct position, allowing it to move in a controlled way.

Different types of rotator cuff disorder can cause different symptoms, but common features include:

- Pain that is worse during activities that involve your arm being above shoulder level – for example, when brushing your hair
- Pain when you move your arm in an arc away from your body
- Pain on the front and side of your shoulder
- Pain at night.

There are a number of different types of rotator cuff disorders, including:

Tendonitis and bursitis

Tendonitis is inflammation (swelling) of a tendon. Bursitis is inflammation of a bursa. A bursa is a small fluid-filled sac usually found over the joints and between tendons and bones.

Rotator cuff tendonitis and bursitis are usually the result of irritation and inflammation caused by a shoulder injury or overuse of the shoulder. For example, these conditions may affect someone whose job involves a lot of overhead lifting.

Tendonitis and bursitis often occur together. When the tendons or bursa are trapped between the bones it is often known as "impingement syndrome". If the tendon is repeatedly scraped against the shoulder bones, it can gradually weaken and will sometimes tear.

Tears

A torn muscle or tendon will cause severe pain and possible weakness in your arm and shoulder. Some people may also feel a popping sensation when they move their shoulder.

Multiple studies have illustrated the direct correlation between incidence of tears and increasing age.^{4,5}

It is estimated around half of people over the age of 60 may have partial or complete rotator cuff tears. This is because your tendons become weaker as you get older.

Tears that affect younger people are usually caused by an trauma.

Rotator cuff syndrome

The term "rotator cuff syndrome" is used to describe any type of damage to tendons in the rotator cuff, including complete tears.



Shoulder instability

Shoulder instability occurs when the ball part of the shoulder joint does not move correctly in the socket. This can range from a slipping or “catching” feeling in your shoulder, to a full shoulder dislocation where the ball comes completely out of the socket.

People with shoulder instability often describe symptoms that are similar to having a “dead arm,” such as:

- Tingling
- Weakness
- Numbness
- Shoulder fatigue
- A clicking, locking or popping sensation.

If the shoulder is dislocated (where the ball has come out of the socket), symptoms can include:

- Severe pain
- The arm being visibly out of position
- Muscle spasms where the muscles contract painfully
- Limited movement.

HOW IS A SHOULDER CONDITION DIAGNOSED?

A diagnosis is usually based on your symptoms and an examination of your shoulder, but sometimes further investigations are required:

- Blood tests to see whether you may have an underlying arthritis such as rheumatoid arthritis
- X-rays provide images of the bones and joints. They can show any changes caused by arthritis in the shoulder joint (for example, bone spurs or narrowed joint space) or fractures
- Ultrasounds are typically used to investigate the rotator cuff tendon for inflammation, tears or rupture
- Computed tomography (CT) and magnetic resonance imaging (MRI) scans are usually not the first test used to investigate shoulder pain. They may be used when a fracture is suspected or an accident is involved. These scans will help determine the extent of injury and whether further assessment and treatment by a surgeon is needed.

How to ease shoulder pain

There are several ways you can help ease and manage shoulder pain, swelling and stiffness. Here are a few suggestions to consider. Discuss these with your doctor or physiotherapist.

1 Heat and cold therapy

If your shoulder pain is due to a recent injury or is inflamed (warmer to touch than the other side), an ice pack may be helpful.

Place the ice pack on the affected area for 10 to 15 minutes. For most other types of shoulder pain, heat packs can achieve some pain relief, particularly if the muscles feel sore and tense. You can use a reusable heat pad (which you can buy from pharmacist and sports shops), a microwaveable wheat bag or a hot-water bottle.

Don't put heat or ice packs directly onto your shoulder. Wrap them in a towel (a damp towel for ice packs), before you apply to the skin to avoid burning or irritating your skin.

If your shoulder is painful to sleep on, the following positions may reduce discomfort:

- Lie on your good side with a pillow under your neck
- Use a folded pillow to support your painful arm in front of your body
- Another pillow behind your back can stop you rolling back onto your painful side
- If you prefer to sleep on your back, use one or two pillows under your painful arm to support it off the bed.

2 Posture

Poor posture or habits can worsen shoulder problems. This can include shoulders becoming rounded and slouching, particularly when sitting at a desk.

Slouching for long periods can place strain on muscles and soft tissues around the neck and shoulders. This strain may increase tension in the muscles, which may in turn cause pain.

Changing your position frequently and sitting in a supported upright position may prove helpful.

Your upper body posture improves if your lower back is supported. When sitting, depending on the chair, you may need to place a pillow or cushion behind your lower back. It's important to ensure your arm is supported and that you feel comfortable.

Look into a mirror and make a conscious effort to hold your shoulder blades up and back. This should make your chest stand out as if you were taking a deep breath.



DID YOU KNOW?

Poor posture at work can result in back pain, discomfort of the head, neck, shoulder, arm, hand, wrist, leg and foot, circulation problems and headaches.⁶



3 Reducing the strain

Generally it's best to carry out your normal activities, but don't overdo it. Bodies are designed to move but you may need to pace yourself and try to gradually do a bit more each day.

Some useful tips



Vacuuming

Keep your upper body upright with the cleaner close to your body, and use short sweeping movements.



Ironing

Only iron essential items, and make sure the ironing board is at waist height.



Shopping

Use a trolley or a backpack to carry shopping or divide the weight between two bags and carry one in each hand. Alternatively, use bags with long straps and carry them with the straps crossed over your body from shoulder to hip.



Tablets and phones

Limit the amount of time when you are sat looking at tablets and mobile phones. Instead use a stand and place them on a table to reduce neck strain.



Posture

Try to maintain a good posture when sitting or standing. Avoid holding your neck in fixed or twisted postures.



DIY

When doing DIY try to allocate enough time and help required to complete the task. Also take lots of rests by moving around, and switching tasks and positions if you can.



Take regular breaks

If you work at a desk or workstation, try to get up and move around every so often. Make regular gentle movements through the full range of the neck and shoulders.



Computer use

If you use a computer keep the keyboard and monitor directly in front of you, so you don't have to turn your head or twist your body. Keep the mouse within easy reach so you don't stretch.



Phone use

When using the phone don't trap the receiver between your head and your shoulder. If you're on the phone a lot, use a telephone headset.



Things not to do...

- Completely stop using your shoulder – this can stop it getting better
- Do things that seem to make it worse
- Make up your own strenuous exercises or use heavy gym equipment
- Slouch when sitting – don't roll your shoulders or bring your neck forward.

4 Exercise

If you have shoulder pain, it's important to keep your shoulder joint mobile with light and gentle movement. Not using your shoulder can cause your muscles to waste away and may make any stiffness worse. Therefore, if possible, you should continue using your shoulder as normal.

If your shoulder is very stiff, exercise may be painful. Your doctor or physiotherapist can give you exercises to do without further damaging your shoulder.

The following exercises are designed to help ease shoulder pain and strengthen the structures that support your shoulder. If your pain increases when exercising, stop doing it and seek medical advice.

Consult your doctor or physiotherapist before starting any exercise program.



DID YOU KNOW?

Good working positions involve working with the body in a neutral position in which your joints are aligned and supported in their natural position. This reduces the stress and strain on the body, including the shoulder.

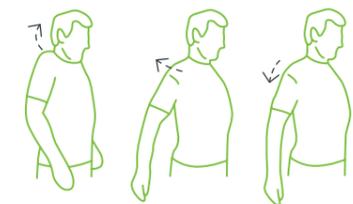
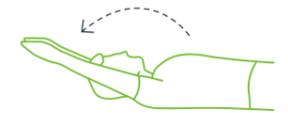


Pendulum exercise

Stand with your good hand resting on a chair. Let your other arm hang down and try to swing it gently backwards and forwards and in a circular motion. Repeat about five times.

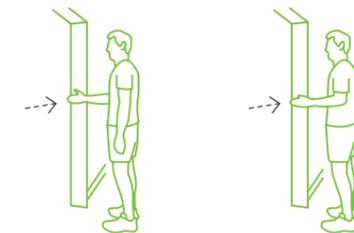
Arm stretch

Lie on your back. Raise your arms overhead as far as you can. Hold for five seconds and relax. Repeat 10 times



Shoulder stretch

Stand and raise your shoulders. Hold for five seconds. Squeeze your shoulder blades back and together and hold for five seconds. Pull your shoulder blades downward and hold for five seconds. Relax and repeat 10 times.



Door press

a) Stand in a doorway with your elbow bent at a right angle and the back of your wrist against the door frame. Try to push your arm outwards against the door frame. Hold for five seconds. Do three sets of 10 repetitions on each side.

b) Use your other arm and, still with your elbow at a right angle, push your palm towards the door frame. Hold for five seconds. Do three sets of 10 repetitions on each side.



Door lean

Stand in a doorway with both arms on the wall slightly above your head. Slowly lean forward until you feel a stretch in the front of your shoulders. Hold for 15–30 seconds. Repeat three times

5 Eating well

It is not only important to keep active when recovering from shoulder pain, but it is also important to eat well.

The Australian Dietary Guidelines⁷ suggest the following tips that can help to achieve a healthy weight and improve overall health.

Enjoy a wide variety of foods from these five groups every day

- Vegetables, including different types and colours, and legumes/beans
- Fruit
- Grain (cereal) foods, mostly wholegrain and/or high cereal fibre varieties, such as breads, cereals, rice, pasta, noodles, polenta, couscous, oats, quinoa and barley
- Lean meats and poultry, fish, eggs, tofu, nuts and seeds, and legumes/beans
- Milk, yoghurt, cheese and/or their alternatives, mostly reduced fat (reduced fat milks are not suitable for children under the age of two years).

And drink plenty of water.

Limit saturated fat

Limit foods high in saturated fat such as biscuits, cakes, pastries, pies, processed meats, burgers, pizza, fried foods, potato chips, crisps and other savoury snacks.

Replace high fat foods which contain predominantly saturated fats such as butter, cream, cooking margarine, coconut and palm oil with foods which contain predominantly polyunsaturated and mono-unsaturated fats such as oils, spreads, nut butters/pastes and avocado.

Limit added salt

Limit intake of foods and drinks containing added salt.

- Read labels to choose lower sodium options among similar foods
- Do not add salt to foods in cooking or at the table.

ASSESSING A HEALTHY WEIGHT

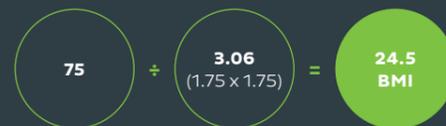
These goals are a general guide. Work with your doctor to set your personal goals.

BODY MASS INDEX (BMI)

How to measure BMI



For example, a 75kg person with a height of 1.75m:



Risk Classification

BMI	Classification	Risk
Less than 18.50	Underweight	Low*
18.50 – 24.99	Normal range	Average
25.00 – 29.99	Overweight/Preobese	Increased
30.00 – 34.99	Obese Class 1	Moderate
35.00 – 39.99	Obese Class 2	Severe
40.0 or greater	Obese Class 3	Very severe

* Risk of other clinical problems increased

Omega 3 fats

Eating foods rich in omega-3 fats (a type of polyunsaturated fat) may reduce inflammation. While the effects are not as potent as some medications, they do not have serious side effects and provide heart health benefits too.

Foods high in calcium and Vitamin D

Calcium and Vitamin D are both important to increase bone strength, and Vitamin D helps improve calcium absorption, as well as boosting the immune system. Low fat dairy products such as milk, yoghurt and cheese are the best way to get both of these nutrients, as well as green leafy vegetables.

Limit added sugars

Limit intake of foods and drinks containing added sugars, such as confectionery, sugar sweetened soft drinks and cordials, fruit drinks, vitamin waters, energy and sports drinks.

Limit alcohol intake

If you choose to drink alcohol, limit intake. For women who are pregnant, planning a pregnancy or breastfeeding, not drinking alcohol is the safest option.

There are some food components and substances that may have some impact on relieving inflammation or controlling symptoms that you may experience from chronic pain.

Fish oil supplements

Fish oil supplements are widely available in supermarkets and pharmacies in a range of doses. The dose needed to reduce inflammation is about 2.7 grams of omega-3 (EPA plus DHA) daily. This dose usually requires either:

- 9–14 standard 1000mg fish oil capsules, or
- 5–7 capsules of a fish oil concentrate per day, or
- 15mL of bottled fish oil, or
- 5–7mL of concentrated bottled fish oil per day.

It may take a few months to notice improvements in symptoms after you start taking fish oils regularly. If there is no change; speak with your doctor about other options. Make sure that if you use supplements to take pure fish oil rather than fish liver oils (such as cod liver oil). Fish liver oils contain large amounts of Vitamin A which can cause serious side effects if taken in large doses.

WHAT ABOUT GLUCOSAMINE AND CHONDROITIN?

Glucosamine and chondroitin are substances naturally found in the body which are thought to be important components in building and maintaining healthy cartilage.

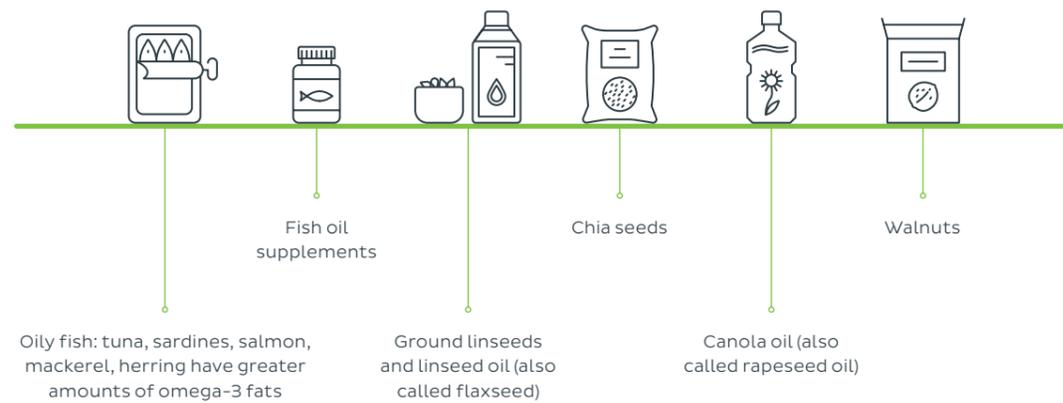
They are commercially available as supplements, which have been made from shells of crustaceans (in the case of glucosamine) or from cow or shark cartilage (in the case of chondroitin).

There is limited and unclear evidence that supports the effectiveness of glucosamine and chondroitin in reducing joint pain. Despite this, both supplements are relatively safe to take with few side effects.

Speak to your doctor if you want to trial glucosamine and/or chondroitin to make sure you choose the right type and dose for you.

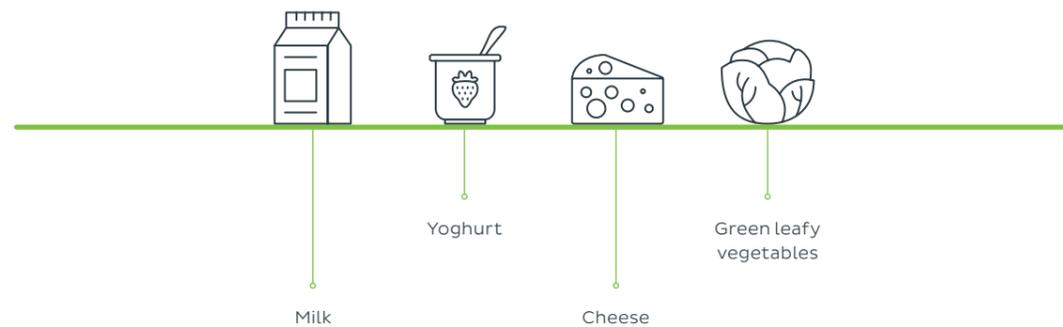
Please consult your doctor or Accredited Practising Dietitian before commencing a new diet.

FOODS RICH IN OMEGA-3 FATS



FOODS HIGH IN CALCIUM AND VITAMIN D

Calcium and Vitamin D are both important to increase bone strength. Vitamin D also helps improve calcium absorption, as well as boost the immune system. Low fat dairy products and green leafy vegetables are the best way to get both of these.



WHAT IS A STANDARD DRINK?



6 Managing your emotional health

When you are managing shoulder issues, it is common to experience a range of emotions including stress, worry, anger, grief, frustration and sadness.

These are all normal emotions and can motivate you to manage your symptoms and engage in treatment. The emotional distress may change over time as a result of changes in your capacity, your levels of and ability to cope with pain, changes in your symptoms and perceived effectiveness of your treatment.

It is, however, important to take note of how you are feeling and to address feelings of depression and anxiety that last longer than two weeks. It is also important to pay attention to your use of substances to help manage your symptoms.

Minimising your distress and putting on a brave face is not the answer. Depression, anxiety and substance misuse are just like other health problems, there are treatments available; however there is no one size fits all. There are a range of effective treatments and health professionals, including your psychologist, psychiatrists, specialist addiction counsellors and social workers, who can help you on the road to recovery. Your doctor will be able to make the appropriate referral and enable you to claim some of the fee through Medicare.



Managing Stress

Trying to relax is a crucial part of easing the pain caused by muscle tension. Whilst you cannot always avoid stress, you can learn to reduce and manage stress.

The following tips can help you look after your mind and body, and reduce stress and its impact on your health.

- 1 Identify warning signs**
Learn to notice the signs in your body that indicate when stress is becoming a problem, such as tensing your jaw, experiencing headaches, irritability and short temper.
- 2 Identify your sources of stress**
These might include late nights, deadlines, relationships, financial worries or changing jobs. By anticipating, managing or even finding ways to remove the source will help reduce stress.
- 3 Establish routines**
Routines such as regular times for exercise and relaxation, meal times, waking and bedtimes, can be calming and reassuring, and can help you to manage your stress.
- 4 Look after your health**
Focus on healthy eating and getting regular exercise. Take time to do activities you find calming or uplifting, such as listening to music, walking or dancing. Avoid using alcohol, tobacco or other drugs to cope.
- 5 Connect to others who care**
Share your thoughts and feelings with others when opportunities arise. Don't 'bottle up' your feelings. When you share your concerns or feelings with another person, it does help relieve stress. But it's important that the person you talk to is someone that you trust and who you feel can understand and validate your thoughts and feelings.
- 6 Make time for fun and relaxation**
Nurturing yourself is a necessity, not a luxury. If you regularly make time for fun and relaxation, you'll be in a better place to handle life's stressors. Relaxation techniques such as yoga, meditation, and deep breathing can help you manage stress levels.
- 7 Manage your time**
Poor time management can cause a lot of stress. Try not to over commit yourself. Prioritise or delegate tasks to others if you can.

Treatment options for shoulder pain

There are several types of treatment for shoulder pain, depending on the cause of your shoulder pain and your symptoms. The main treatment options for shoulder pain include:

Painkillers

If your pain is mild, your doctor may advise you to use painkillers. If your shoulder pain is more severe, your doctor may recommend or prescribe a non-steroidal anti-inflammatory drug (NSAID). As well as easing the pain, NSAIDs can also help reduce swelling.

Always talk to your doctor or pharmacist before you take any medicine for your shoulder pain, as even natural and over-the-counter medicines can have side effects.

Steroid injections

If your shoulder pain is very severe, oral painkillers may not be enough to control the pain.

Corticosteroid injections in and around your shoulder joint may help to relieve the pain and increase your range of movement for several weeks at a time.

The pain relief should allow you to do your physiotherapy exercises more easily.

Talk with your doctor about whether steroid injections are right for you.

Repeated injections (more than two or three) aren't usually recommended. If the problem keeps coming back, your doctor will probably suggest other treatments or further investigation.

Your GP may refer you for specialist treatment with an orthopaedic surgeon (a specialist in conditions that affect the bones and muscles) or a rheumatologist (a specialist in conditions that affect the muscles and joints) if you have:

- A frozen shoulder
- A rotator cuff disorder
- An acromioclavicular joint disorder
- A rotator cuff tear
- Shoulder instability and you are under 30 years old.

Your doctor will be able to give more specific advice.



If shoulder pain is affecting your everyday activities like dressing, washing or driving, an occupational therapist may help by offering aids or different ways of doing things, to reduce the strain on your shoulder.





Physiotherapy

Most shoulder problems will benefit from physiotherapy. A physiotherapist will assess your condition and put together a tailored treatment program.

The aim of physiotherapy is to improve symptoms and restore function. The approach will depend on whether you have a short-term (acute) problem or a long-standing (chronic) condition.

Physiotherapy uses a number of different methods to promote recovery:

- Exercises to strengthen weakened muscles, change their co-ordination and improve function
- Advice on improving shoulder, neck and spine posture
- Exercises to ease or prevent stiffness
- Exercises to increase the range of joint movement
- Applying adhesive tape to the skin to reduce the strain on the tissues and to help increase your awareness of the position of the shoulder and shoulder blade
- Manual treatments to the soft tissues and joints.

If you are referred to a physiotherapist, they should explain to you what treatment they will use and how it will work.

Surgery

Most shoulder problems improve without the need for surgery. But some conditions can be helped by surgery.

If an operation is needed it can often be performed using keyhole techniques, which require a smaller incision, and often reduce the recovery time needed.

Surgeries include:

- Subacromial decompression, which involves trimming bone and tissue from the underside of the acromion at the top of the shoulder. This can be helpful for severe or recurrent impingement syndrome by giving space for the rotator cuff tendons to move freely
- Repairing tears in the rotator cuff
- Releasing the tight capsule of a frozen shoulder
- Shoulder joint replacement is well established and can be successful, particularly for osteoarthritis and rheumatoid arthritis, when severe pain restricts movement and shoulder use.



Physiotherapy and exercises are important after surgery to help regain movement, although you may not regain full range of movement or strength after a total shoulder replacement.

Where to find more information and support

How do I find a health professional?

If you don't have a regular GP, speak to your local practice or medical centre.

You may want to consider approaching a **physiotherapist** directly by contacting the Australian Physiotherapy Association:

→ 1300 306 622

Use the 'Find a Physio' feature on their website:

→ physiotherapy.asn.au

To find an **occupational therapist** see the Occupational Therapy Australia website:

→ otaus.com.au

To find a **psychologist** see the Australian Psychological Society website:

→ psychology.org.au

healthdirect

Trusted health information and advice online and over the phone, available 24 hours a day, 7 days a week. Funded by the governments of Australia.

→ 1800 022 222

→ healthdirect.gov.au

Arthritis Australia

Arthritis Australia is the peak body and works on behalf of the nearly four million Australians living with arthritis. Learn more about arthritis and how to manage it by contacting Arthritis Australia.

→ 1800 011 041

→ arthritisaustralia.com.au

Visit www.empowered.org.au to hear directly from people with rheumatoid arthritis and similar conditions on how they learned to deal with the emotional ups and downs of living with arthritis.

Eat for Health

An Australian government website providing information, resources and tools about the Australian Dietary Guidelines and advice about the amount and kinds of foods that we need to eat for health and wellbeing.

→ eatforhealth.gov.au

About TAL

TAL is Australia's leading life insurance specialist, protecting people – not things – for over 150 years. Today, we insure more than 5 million Australians and in 2022, reached a new milestone paying \$3.5 billion in claims.

At the heart of the claims experience is you. Our goal is to help you lead as healthy and full a life as possible and help you get back to health as quickly as possible, taking into account all of your circumstances: your physical health, your mental wellbeing and your social support.

TAL's focused on your health

Health and wellbeing is at the heart of what we do. From your physical and mental health, to your social and financial wellbeing – helping you be the best you can be is our number one priority.

We want all Australians to live a life as healthy and full as possible, because that's what living this Australian life is all about. Our focus on your health begins when your cover does. Working with you to keep you well and supporting your return to health, with a personalised plan should the unfortunate happen and you suffer an illness or injury.

Because your health and wellbeing is as important to us as it is to you.

References

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