

SCAPULAR STABILIZATION:

A Priority in Early Rehab of the Shoulder

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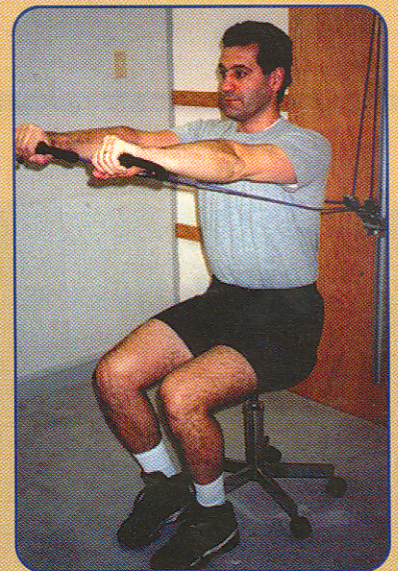
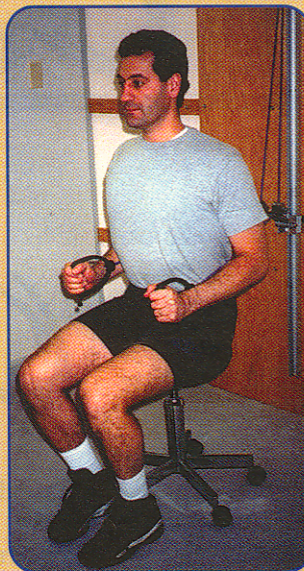
Whether the results of tendinitis, bursitis or degenerative joint disease, rehabilitation of the shoulder girdle should include a comprehensive strengthening program to restore joint stability.

There are three primary factors which make the shoulder girdle a weak functional link:

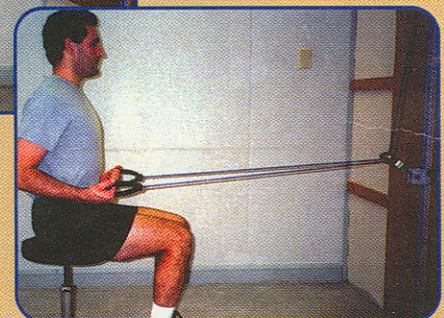
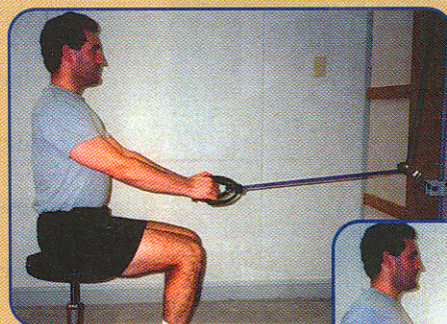
- poor humeral head/glenoid cavity ratio,
- a scapulothoracic joint which represents a moving platform with weak ligamentous attachments,
- activities of daily living which demand overhead movements and result in repetitive strain injury to the rotator cuff.

Most chiropractors recognize the value of rotator cuff strengthening for stabilizing the glenohumeral joint. More recent studies recommend that scapular stabilization be the priority in early rehab of the shoulder.¹

Please consider the following exercises to strengthening the lower scapular musculature at the start of a shoulder rehab program in your office. An inexpensive wall mounted surgical tubing systems provides the necessary resistance to perform the following exercises:



• Seated Cable Rows (Figure 1)



• Seated Cable Raises (Figure 2)

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