

PERIARTHRITIS HUMEROSCAPULARIS –PRIKAZ SLUČAJA

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Sažetak: Rameni pojas predstavlja karakterističan sistem međusobno povezanih kostiju ramena, koji omogućavaju maksimalnu pokretljivost gornjeg ekstremiteta. Zbog velike pokretljivosti ovaj segment je tokom života izložen uticaju brojnih etioloških faktora koji oštećuju njegove pojedine strukture. Periartritis humeroscapularis (PHS) predstavlja leziju okolozglobnih struktura ramena. Osnovnom kliničkom znaku, bolu u ramenu mogu da se pridruže ukočenost i slabost u ramenu. Liječenje bolnog ramena ima za cilj što ranije oslobađanje pacijenta od bola, mišićnog spazma, postizanje uredne pokretljivosti i mišićne snage ramenog pojasa. U fizioterapiji postoji veći broj procedura kojima se može sanirati ovo vanzglobno oboljenje. Cilj rada je prikazati individualne fizioterapijske postupke i procedure u procesu ambulantnog liječenja periartritis humeroscapularis-a. U radu je prikazan slučaj pacijentice sa dijagnozom tendinis humeri calcificata. Prilikom određivanja funkcionalnog statusa rađeno je mjerenje obima pokreta u ramenu, manuelni mišićni test i mjerenje VSP razmaka obe ruke te procjena bola. Tokom ambulantnog liječenja, u trajanju od dvadeset dana, primjenjena je kineziterapija i više fizikalnih procedura (krioterapija, elektroforeza, laser, diadinamske struje, magnet, sonoforeza). Nakon završenog ambulantnog liječenja praćeni parametri pokazali su poboljšanje, čime je potvrđeno da primjena kineziterapije i fizikalnih procedura daje izuzetne rezultate.

Ključne riječi : bol, periartritis humeroscapularis, kineziterapija, fizikalne procedure

PERIARTHRITIS HUMEROSCAPULARIS– CASE STUDY

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Abstract: The shoulder girdle is a characteristic system of interconnected shoulder bones, which enable maximum mobility of the upper limb. Due to its high mobility, this segment is exposed during its life to the influence of numerous etiological factors that damage its individual structures. Periarthritis humeroscapularis (PHS) is a lesion of the peri-articular structures of the shoulder. The basic clinical sign of shoulder pain may be accompanied by stiffness and weakness in the shoulder. The treatment of a painful shoulder aims to relieve the patient from pain, muscle spasm, achieve proper mobility and muscle strength of the shoulder girdle as soon as possible. In physiotherapy, there are a number of procedures that can be used to repair this extra-articular disease. The aim of the paper is to present individual physiotherapy procedures and procedures in the process of ambulatory treatment of periarthritis humeroscapularis. The paper presents the case of a patient diagnosed with tendinitis humeri calcificata. When determining the functional status, the range of motion in the shoulder was measured, a manual muscle test and the VSP distance of both hands were measured, and pain was assessed. During the twenty-day outpatient treatment, kinesitherapy and several physical procedures were applied (cryotherapy, electrophoresis, laser, diadynamic currents, magnet, sonophoresis). After the outpatient treatment was completed, the monitored parameters showed an improvement, which confirmed that the application of kinesitherapy and physical procedures gives exceptional results.

Key words: pain, periarthritis humeroscapularis, kinesitherapy, physical procedures