

Biceps Tendinopathy / Bicipital Tendonitis

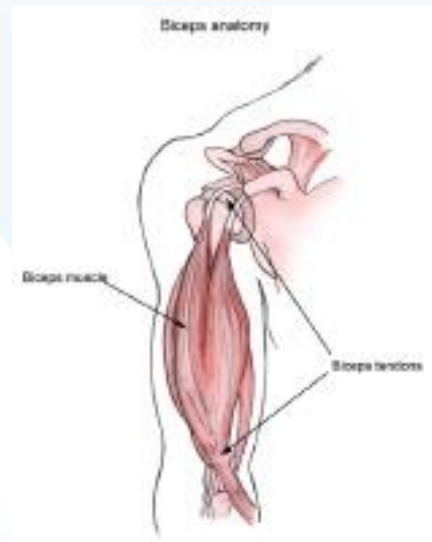
Bicipital tendinopathy (sometimes called biceps tendonitis) is an inflammatory process within the long head of the biceps brachii tendon. Due to its function and position, it is a common cause of shoulder pain. The tendon is exposed on the anterior (front) part of the shoulders as it passes through the humeral groove and inserts into the superior aspect in the glenohumeral joint. To find the point of the pain, simply rest your palm across your opposite upper arm and where your thumb sits will be the location of the pain (the front of the shoulder).

Disorders of the tendon may result from an isolated inflammatory injury, but most often pain here is caused by overuse and repetitive strain. Some of the other causes are secondary to compensating for labral tears, rotator cuff disorders and pathology. Contributing factors to the pain are poor posture, and weightlifting (a common cause).

Bicipital Tendinopathy Anatomy

Just as the name implies, the bicep (literal meaning: two heads) has two proximal heads that have a common distal insertion to the radius. The long head of the biceps comes together with the short head of the bicep to create the brachii muscle. The muscle is a powerful supinator (twists your arm) and flexor in the forearm. In the bicipital groove of the humerus, the long head tendon lies between both the lesser and the greater tuberosity and goes at a 90-degree angle toward the upper groove end. The long head works by stabilizing the humeral head, especially when it comes to external rotation and abduction.

The muscle is located on the front of the upper arm. The joint is responsible for flexing the elbow, supinating the wrist, moving the forearm close to the upper arm, flipping the palm face up and flexing the shoulder forward for reaching in front of your body.



How to Treat Bicipital Tendinopathy:

1. Anti-Inflammatory Medications

Anti-inflammatory medication will help to reduce swelling and pain in the joint. Once the pain is manageable, you can return to stretching the biceps regularly and return to light activity while avoiding any undue pain.

2. Ice

Apply ice to the area for 10-20 minutes with a cloth. Let the skin return to normal temperatures before reapplying.

3. Heat

Use heat to help soothe the tendon after the pain is gone. Avoid using heat on acute injuries. If the injury continues, limit activities to those of daily living. Seek advice about how frequently to use ice and heat from your www.rehabmypatient.com therapist.

4. Therapy

Physiotherapy or manual therapy, including soft tissue massage, is one of the best ways to treat bicipital tendinopathy. Massage stimulates blood flow to the tissues, and reduces adhesions and tightness in the bicep muscle and tendon. Electrotherapy such as ultrasound and LASER can stimulate healing and reduce inflammation. Acupuncture can also help with reducing pain and breaking the cycle of chronic pain. Therapy is also very important to address poor posture, which can place the shoulder in a poor mechanical position making this condition more likely.



Tips:

- For preventing tendinopathy from happening in the first place, stretch the tendons on a regular basis by positioning the arm straight back while holding onto the frame of a door. Light stretching is often enough to make sure the muscle is limber and ready to handle everyday activities.
- Strengthen the muscles by using light weights at first to avoid overusing the muscle. Make sure to change your position on a regular basis when exercising and at work to avoid any undue pain and overuse.
- Tendinopathy can occur because of arthritis or diabetes, but it often occurs because the area has been used too much.
- Tennis, pitching, weightlifting, cleaning, painting, overhead assembly work and climbing are all activities that place undue strain on the area.
- Any activity that repeatedly flexes the elbow or makes you put the arms over your head for an extended period of time can cause tendinitis to set in.