SYMPTOM

Shoulder pain

Shoulder pain is discomfort around the shoulder joint that may affect movement or sleep.

WHAT IT FEELS LIKE
An ache or sharp pain, often worse with movement

WHERE IT IS FELT
Shoulder joint, upper arm, shoulder blade, or nearby neck

MOST COMMON CAUSES
Muscle strain, rotator cuff irritation, frozen shoulder

WHEN IT IS URGENT
Fever with a hot, swollen shoulder, or major injury

USUALLY LASTS
Days to months, depending on injury and underlying cause

SEE A DOCTOR IF
Pain lasts two weeks, worsens, or limits sleep or movement

Overview

Shoulder pain can come from the joint itself or from nearby muscles, tendons, ligaments, and fluid-filled cushions called bursae. The shoulder has a wide range of movement, so several structures must work together each time you lift or turn your arm.

Pain may begin after an injury or repeated activity. It can also develop gradually without an obvious cause. Sometimes pain felt in the shoulder comes from the neck, nerves, chest, or another part of the body.

The pattern of pain can offer clues, but it cannot confirm the cause by itself. An examination may be needed if pain is severe, persistent, or affecting daily life.

What it may feel or look like

Shoulder pain may be dull, burning, sharp, or throbbing. It can remain in one spot or spread into the upper arm, shoulder blade, or neck.

You may notice:

Pain that travels below the elbow with tingling or numbness may come from an irritated nerve

in the neck rather than the shoulder itself. However, symptoms can overlap.

- Pain when reaching overhead, behind your back, or across your chest
- Stiffness or reduced movement
- Weakness when lifting or turning the arm
- Clicking, catching, or a feeling that the shoulder may slip
- Pain when lying on the affected side
- Swelling, bruising, warmth, or a change in shape after injury

Common causes

Common causes include muscle strain and irritation of the rotator cuff. The rotator cuff is a group of muscles and tendons that holds the shoulder steady and helps lift the arm. Repeated overhead work, sport, heavy lifting, or an awkward movement can irritate these tissues.

Bursitis means inflammation of a bursa, one of the small fluid-filled cushions around the joint. It can cause pain when lifting the arm or lying on the shoulder. Rotator cuff pain and bursitis often occur together.

Frozen shoulder causes increasing pain and stiffness. Movement becomes limited both when you move the arm yourself and when someone else tries to move it. It may develop without a clear injury and can last much longer than a simple strain.

Arthritis can cause aching, stiffness, grinding, and reduced movement. Osteoarthritis develops as joint cartilage changes over time. Arthritis can also affect the smaller joint at the top of the shoulder, where the collarbone meets the shoulder blade.

Less common causes include shoulder instability, a rotator cuff tear, calcium deposits in a tendon, inflammatory arthritis, or pain referred from the neck. A tear may follow an injury or develop gradually as a tendon weakens over time.

Urgent causes include a fracture, dislocation, joint infection, or a serious problem elsewhere in the body. These are less common, but prompt assessment matters when warning signs are present.

When to seek medical care

Call emergency services if shoulder or arm pain occurs with chest pressure, shortness of breath, sweating, faintness, or nausea. These can be symptoms of a heart attack, especially

when the discomfort is new or unexplained.

Emergency care is also appropriate after a major injury if the shoulder looks out of place, the arm is cold or pale, or you cannot feel or move it normally.

Seek same-day medical advice if:

Book a routine appointment if pain is not starting to improve after about two weeks, keeps returning, disturbs sleep, or makes work and daily activities difficult. Arrange care sooner if you have had recent shoulder surgery or have a condition or treatment that reduces your ability to fight infection.

- The shoulder is hot, red, or swollen and you have a fever
- Severe pain started suddenly or followed an injury
- You cannot lift the arm after an injury
- New weakness, numbness, or persistent tingling develops
- Swelling or bruising is increasing quickly

How the cause is found

A healthcare professional will ask when the pain began, where it is felt, and which movements make it better or worse. Mention any injury, repeated activity, neck symptoms, fever, numbness, chest symptoms, or previous shoulder problems.

During an examination, they may compare both shoulders and check movement, strength, tenderness, sensation, and circulation. They may also examine your neck because neck and shoulder problems can produce similar symptoms.

Imaging is not always needed. An X-ray can show fractures, dislocation, arthritis, or some calcium deposits. Ultrasound or magnetic resonance imaging, known as MRI, may be used when a tendon or other soft-tissue injury is suspected. Blood tests may be appropriate when infection or inflammatory disease is a concern.

Treatment and self-care

Treatment depends on the cause, how long symptoms have been present, and how much movement or strength you have lost.

For mild pain without a significant injury, keep the shoulder gently active within a comfortable range. Avoid movements that repeatedly worsen the pain, but do not keep the arm completely

still for long periods unless a clinician has told you to. Prolonged rest can add to stiffness and weakness.

A wrapped cold pack may help after a recent strain or when swelling is present. Gentle warmth may feel better for stiffness. Protect your skin from direct heat or ice.

Paracetamol, also called acetaminophen, or an anti-inflammatory medicine may help some people. Follow the product label and ask a pharmacist if you take other medicines, are pregnant, or have health conditions that may affect which pain reliever is suitable.

Physiotherapy may help restore movement and gradually strengthen the shoulder. Some conditions may be treated with an injection to reduce pain and support rehabilitation. Surgery is considered for selected injuries or when other treatment has not helped; most shoulder pain does not automatically require an operation.

What to expect

A minor strain may start improving over days to weeks. Tendon-related pain often improves more gradually, particularly when the activity that triggered it continues. Frozen shoulder can take many months or longer to settle, although pain and movement usually change in stages.

Recovery is not always steady. Symptoms may briefly increase after unfamiliar activity or exercise. A gradual return to normal use is usually more manageable than making a sudden jump back to heavy lifting or overhead work.

Seek another assessment if pain is worsening rather than improving, movement is becoming more limited, or new weakness, swelling, fever, numbness, or chest symptoms appear.

Common questions

Should I exercise a painful shoulder?

Gentle movement is often helpful when there has been no major injury. Stay within a tolerable range and avoid forcing through sharp pain. An assessment can guide exercise if movement is very limited or weakness is noticeable.

Can shoulder pain come from my neck?

Yes. Irritated joints or nerves in the neck can send pain toward the shoulder and arm. Tingling, numbness, neck pain, or symptoms extending below the elbow make this more likely, but an examination may be needed.

Why does my shoulder hurt at night?

Lying on the painful side can press on irritated tendons or bursae. Some shoulder conditions also ache when the joint remains in one position. Persistent night pain that affects sleep is a reason to book an appointment.

Will I need a scan?

Not necessarily. Many causes can be assessed from the history and physical examination. Imaging is more useful after significant injury, when movement or strength is markedly reduced, or when symptoms do not improve as expected.

Sources

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- American Academy of Orthopaedic Surgeons, OrthoInfo: Shoulder Pain and Common Shoulder Problems
- American College of Radiology: Appropriateness Criteria for Acute Shoulder Pain
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- Centers for Disease Control and Prevention: About Heart Attack Symptoms, Risk, and Recovery