

## **Argus Orthopaedic Zone**

### **POTPOURRI: SHOULDER OPTIONS, ARTHRITIS AND VITAMIN D, ILLOTIBIAL BAND**

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*Transforming patient information into patient understanding.*

#### **Shoulder Arthritis, Non Surgery**

There are 2 joints in the shoulder, the smaller top one or AC joint. Below it is the larger ball and socket, glenohumeral joint. Both can become arthritic.

If there is not too much arthritis, I have a lot of faith in joint injections. This can be very helpful and relieve pain for a long time. I'm talking about steroid or cortisone type injection.

Other treatments exist of course to relieve inflammation and keep the shoulder moving. PT can do this. Oral anti-inflammatory medication can work on occasion.

Lubrication - pain relieving medication like Supartz or Synvisc can be used in special cases. You would have to check with me about this if it is to be used in the shoulder.

#### **Vitamin D and Arthritis**

I am frequently asked if taking Vitamin D should be taken to treat arthritis. The subject is complicated. I wish I could say yes or no.

Let me simplify (If I can!).

- Osteoarthritis and Vitamin D deficiency are both age related disorders.
- Absorption of Vitamin D from food is less in older persons.
- Vitamin D can't keep arthritis from happening.
- Taking enough Vitamin D may prevent arthritis from worsening.
- Vitamin D causes absorption of Calcium and Phosphorus needed for bone growth and repair.

So, yes. Take Vitamin D. If you are over 60, take 2000i.u. per day.

For tons more information about Vitamin D go to the Argus Orthopaedic Zone Archive of articles in the Library section of [www.orthopodsurgeon.com](http://www.orthopodsurgeon.com). Check out articles 49, 50, 51 for much more information about Vitamin D..

### **What is the Iliotibial Band?**

It is a thick band of fibrous tissue that starts in the outside of the hip and goes to the outer side of the leg just below the knee. A sac or bursa on the outer side of the knee can get inflamed, catch and be painful.

#### Treatment

- Rest from activities temporarily
- Ice
- Anti-inflammatory meds like Advil, Motrin or similar
- Possibly Physical Therapy
- Knee brace
- Orthotics
- Steroid injection in painful area.

That's it in a nutshell. The iliotibial band problem rarely requires more treatment than this in my experience. It does require someone such as myself to be making the choices.

### **Office Website and Argus Orthopaedic Zone Archive**

Don't forget to check out the entirely new office website, [www.orthopodsurgeon.com](http://www.orthopodsurgeon.com), Your Orthopaedic Connection and the Argus Orthopaedic Zone Archive of all back articles. You will be amazed! It is a huge amount of information about all the things I treat in the office and hospital.

Our goal is simple - To help people return to more pain free, functional lives. I specialize in you.

Good health. Good life. All the best to you.

Be well.

Dr. Haverbush