

# 骨科及運動醫學中心 Orthopaedic & Sports Medicine Centre

ORCS298 02/2012

查詢或預約，歡迎聯絡我們

## 骨科及運動醫學中心

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### 辦公時間

星期一至星期五：上午十時至下午六時

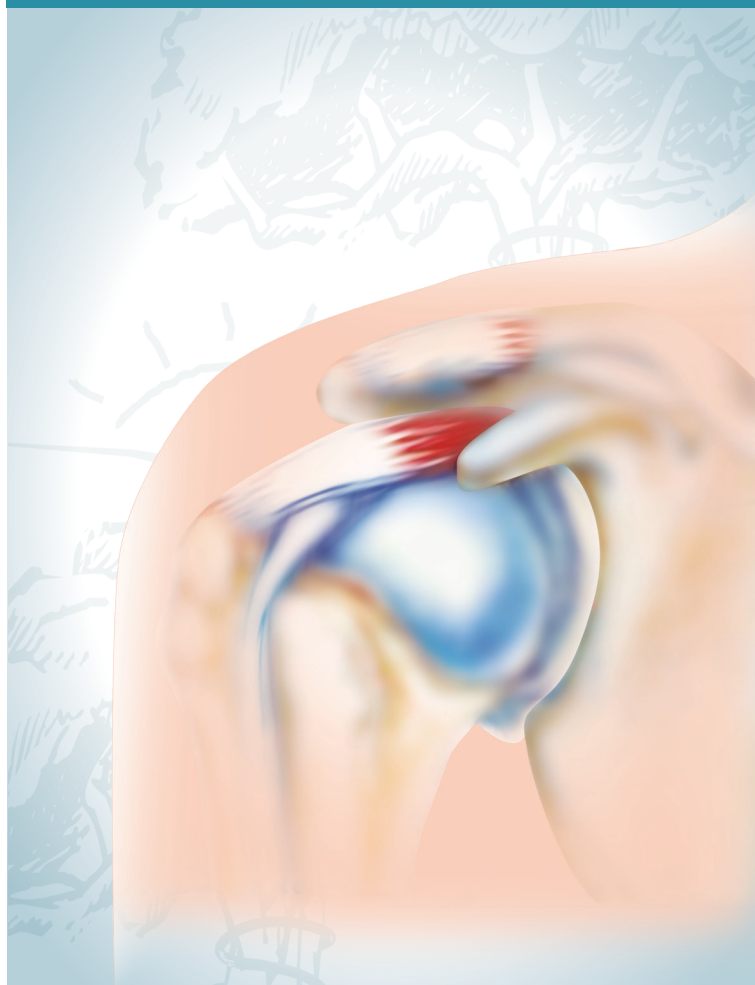
星期六：上午十一時至下午三時

星期日及公眾假期休息

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# 肩關節脫位



養和醫院  
Hong Kong Sanatorium & Hospital

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Orthopaedic & Sports Medicine Centre

臂骨前端（肱骨）套進肩胛骨槽的部分（關節窩）就是肩關節（盂肱關節）。肩胛骨槽周邊有牢固的組織（孟唇），令骨槽變得更深，臂骨前端也就能更穩固地套進去。若臂骨前端脫離肩胛骨槽的話，就是所謂的肩關節脫位。肩胛骨槽周邊的組織（孟唇）一旦從骨槽（關節窩）撕裂，就是孟唇撕裂傷。

## 肩關節脫位時應怎麼辦？

盡快尋求醫生協助將肩膀復位，期間會用X光確定脫位肩關節已準確復位。如果肩膀經常脫位，就是所謂的「復發性肩關節脫位」。如太頻密並影響日常活動，最好考慮手術治療。

## 甚麼是復發性肩關節脫位？

復發性肩關節脫位指肩膀經常輕易脫位。肩膀首次脫位的年紀越輕，之後有復發性脫位的機會也越高。孟唇撕裂後，關節窩內的骨骼也會受損，導致關節慣性脫位。

## 甚麼是肩關節脫位後的痛楚成因？

原因有很多，其中一個是復康治療做得不夠。年輕患者的痛楚成因主要是孟唇撕裂，但肱二頭肌腱撕裂亦有可能。年長患者的痛楚成因則多是肩袖撕裂。

## 如何作出診斷？

肩膀受傷要經臨床診斷，再由造影檢查確認。醫生會向病人查詢病徵及患處歷史，並進行身體檢查。診斷過程經常會進行造影檢查，如磁力共振掃描便相當有效，有時醫生更會為患者拍攝特別的關節造影片。造影前須在肩關節注射顯影劑，以看清楚撕裂傷的情況。這項測試大多與磁力共振掃描同時進行。

## 有何治療方法？

非手術治療包括：

藥物

局部注射

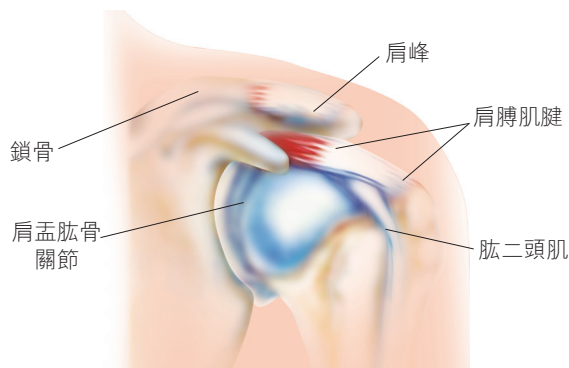
手術治療

如非手術治療法未能舒緩症狀，病人可考慮進行手術

物理治療

用作舒緩症狀

在大部份情況下，撕裂的肩孟唇可由微創手術修補。醫生會在肩膀附近開數個小孔，再把儀器插進去，以錨釘縫合撕裂的肩孟唇。肩膀在手術後或需使用手托作固定，患者亦需要進行物理治療。



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For enquiries and appointments,  
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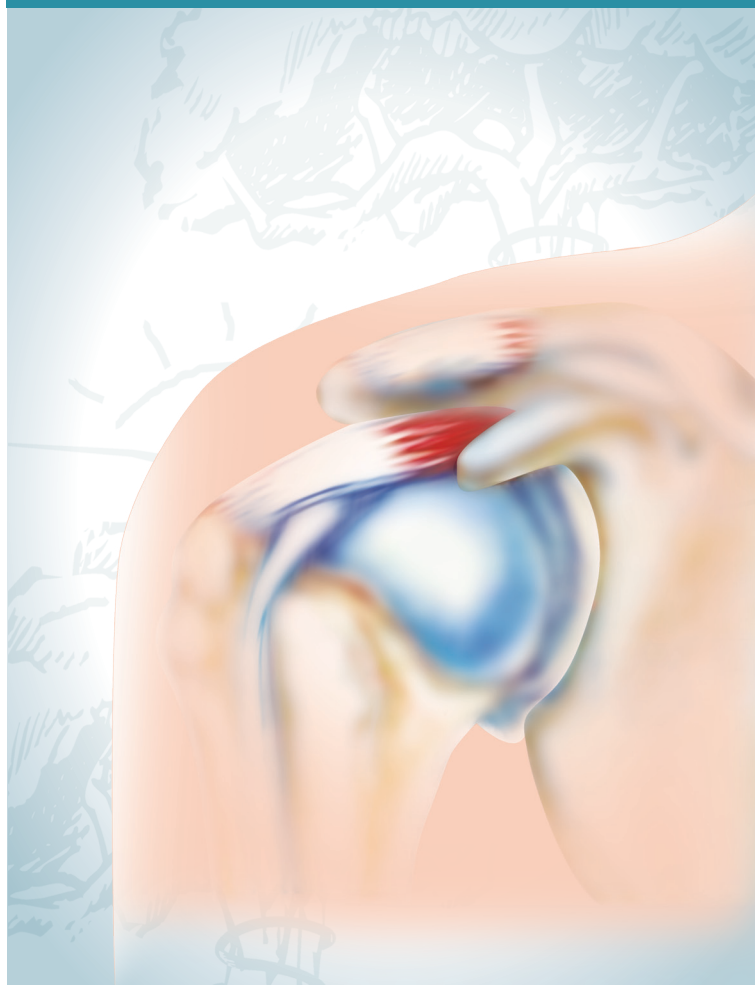
### Service Hours

Monday to Friday: 10:00 am – 6:00 pm  
Saturday: 11:00 am – 3:00 pm  
Closed on Sundays and Public Holidays

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# Shoulder Dislocation



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The head of the arm bone (humerus) fits into the shoulder blade socket (glenoid). We call this the shoulder joint (gleno-humeral joint). There is a firm tissue rim (labrum) around the shoulder blade socket which deepens the socket. The head of the arm bone can therefore fit better into it. When the head of the arm bone comes out of the socket, we call it a shoulder dislocation. When the firm tissue rim (labrum) is torn from the socket (glenoid), we call it a glenoid-labrum tear.

## What Should I Do When My Shoulder Dislocates?

You should seek medical help and have the shoulder put back (reduced) into place as soon as possible. X-ray is often needed to confirm the reduction of dislocation. If the shoulder dislocates frequently, it would be classified as recurrent shoulder dislocation. If it becomes so frequent that it interferes with daily activities, surgery is recommended.

## What Is Recurrent Shoulder Dislocation?

Recurrent shoulder dislocation means the shoulder becomes more prone to dislocation. The younger you are at the time of first dislocation, the higher risk you have of recurrent episodes. Often when the glenoid labrum is torn, the bone in the glenoid would be damaged, contributing to subsequent episodes of dislocation.

## What Are the Causes of Shoulder Pain after Dislocation?

There are many causes. It may be due to a lack of rehabilitation. In younger patients, a glenoid labrum tear is often the cause. Sometimes a biceps tendon tear is the cause. In the older age group, rotator cuff tear is the most common cause.

## How Is It Diagnosed?

Shoulder injuries are diagnosed clinically and confirmed by imaging studies. Your doctor will talk to you to obtain a history of the injury and your symptoms, and perform a physical examination. Imaging investigations are often needed. MRI scans can be very useful. A special test (arthrogram) is sometimes needed, which requires a contrast medium to be injected into the shoulder joint so that these tears can be easily detected. This is often done at the same time with the MRI scan.

## How Is It Treated?

### Non-Operative Treatment

- Medication
- Local injection

### Operative Treatment

If the symptoms are not relieved by non-operative measures, surgery should be considered

### Physiotherapy

Relieves the symptoms

Most of the time, the torn glenoid labrum can be repaired by keyhole surgery (arthroscopically). Your doctor will make a few holes about the shoulder and insert instruments into the shoulder. The torn glenoid labrum is sutured back using suture anchors. After the operation, the shoulder is sometimes stabilized with shoulder immobilizer and physiotherapy is often needed.

