

Comment on “Comparison of the Efficacy of Ultrasound-Guided Suprascapular Nerve Blocks and Intraarticular Corticosteroid Injections for Frozen Shoulder: A Randomized Controlled Trial”

TO THE EDITOR:

I read with interest the study by Lin et al (1) titled, ‘Comparison of the Efficacy of Ultrasound-Guided Suprascapular Nerve Blocks and Intraarticular Corticosteroid Injections for Frozen Shoulder: A Randomized Controlled Trial’. I congratulate the authors on their valuable contributions. However, I have some concerns regarding the article.

Frozen shoulder and rotator cuff tears are pathologies that can often be seen together. The combination of the two may change the results of the treatment method applied (2). The process for including patients with rotator cuff lesions in the study is not clearly explained. This situation may have affected your study results.

All patients in your study received shoulder injections along with several physical modalities (heat and electric therapies) and therapeutic exercises. However, it is not specified which modalities were applied, how, for how long, etc. or whether the exercises were done under supervision or alone. Patients’ compliance with exercises may have influenced your results.

Therapeutic exercises combined with physical modalities in frozen shoulder may be more effective than

intraarticular injection (3). Furthermore, combining physiotherapy (consisting of physical therapy modalities and exercise therapy) with intraarticular injection may have a positive effect on pain outcomes, but not on disability and range of motion, compared to physiotherapy alone (4). Therefore, the physical modalities (heat and electrical therapies) and therapeutic exercises added to injection treatments may have complicated the comparison of suprascapular block and intraarticular injection treatment methods alone.

The study indicated that intraarticular injection group had more favourable outcomes on some outcomes, but it is unclear how this was determined. For example, despite the favourable results noted above, there was a greater increase in the role-emotional subscale score of the SF-36 in the suprascapular nerve block group, while the general health subscale scores of the SF-36 were quite similar between the two groups.

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