

# Anterior deltoid strengthening exercises

As a result of wear and tear, overuse or possibly an accident, some of the muscles deep in your shoulder (called the rotator cuff) have worn. This means it is much harder to raise your arm. Unfortunately it is very difficult and often impossible to repair these muscles.

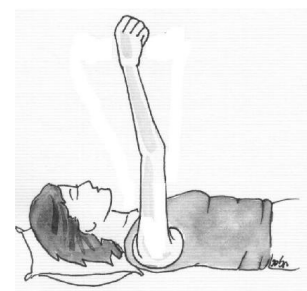
There is another powerful muscle on the outside of your arm (the deltoid muscle) that may be re-trained to do some of the work of the torn rotator cuff muscle.

Re-training can take a long time and needs a lot of repetition to make it automatic. As a result the exercises listed below need to be done three to five times a day. The programme can take up to 12 weeks to progress through all the stages. For most people it should result in less pain and improved movement and function in your shoulder.

It is important that all exercises should be virtually **pain-free**. Your physiotherapist will guide you through the stages and advise you how to pace your exercises and when to progress to the next level. They may also give you some additional exercises tailored to your needs such as to stretch tight muscles or help reduce overactive ones and address general fitness.

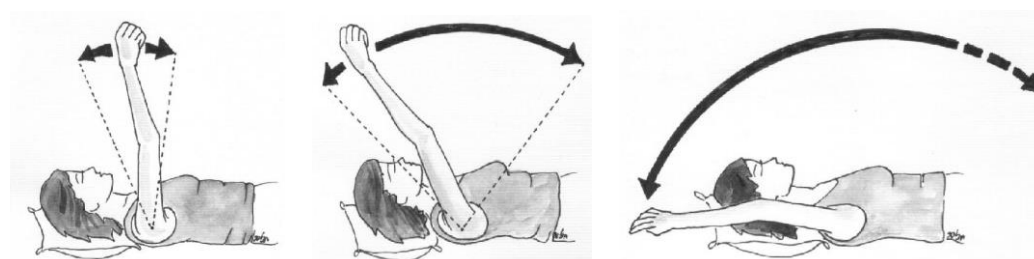
## Exercise 1 (lying on your back)

Lift your bad arm to a vertical position. In the early days you may need to bend the elbow and maybe use your other arm to help. Then hold the bad arm in a vertical position with its own strength for as long as you are able, while also keeping the elbow straight. Bring the bad arm back down to your side with the help of the other arm. As your arm gets stronger, you will be able to lift and lower it to your side without help. When this becomes easy, move to exercise 2.



## Exercise 2 (lying on your back)

With your arm raised and the elbow straight, start to move your arm forwards and backwards. Try to keep the arm moving in a slow, smooth, straight line and keep it lined up with the side of your body. As your control and confidence improves, begin to increase the amount of movement until your arm can move from the side of your body to touching the bed above your head and back again.



**outstanding care**  
**listening and leading**  
**working together**

Somerset NHS Foundation Trust in partnership with  
Yeovil District Hospital and OASIS East

**Advice for patients**

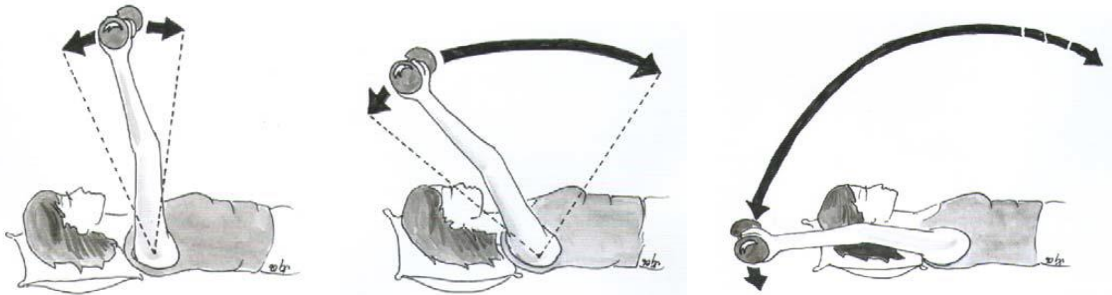
Musculoskeletal Physiotherapy Service/Jul20/review Jan22

[www.somersetft.nhs.uk](http://www.somersetft.nhs.uk)

Continue this movement for up to five minutes or until your arm gets tired. When this becomes easy move to exercise 3.

### Exercise 3 (lying on your back)

The next progression is to add a small weight (e.g. a tin of beans or small bottle of water). Hold this in the hand of your bad arm and continue to move your arm from your side to above your head and back again in a smooth movement for up to five minutes or until your arm gets tired.



### Progress to half sitting and then to sitting / standing

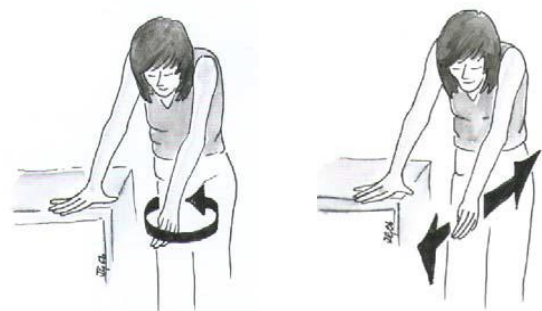
Once exercise 3 becomes easier to carry out, you can alter the starting position of the exercise by gradually moving from lying on your back to half sitting and then to standing. As you begin to sit up, stop using the small weight and start again with just holding the arm in the upright position before carrying out the backwards and forwards movement. Your arm will automatically feel heavier because of the effect of gravity. As the exercise becomes easier again, you can use the weight.



If you are having difficulty raising your arm in the reclined or sitting position you can use your good arm to help lift the bad side and then lower it back down under its own strength.

### Additional exercises

**Pendulum exercises** – standing and leaning forwards, supporting yourself with your good arm, let your bad arm swing like a pendulum. It can swing forwards, backwards, side to side and in a circular motion for up to five minutes. This exercise is also useful to relax the muscles after you have carried out the other exercises.



**outstanding care  
listening and leading  
working together**

Somerset NHS Foundation Trust in partnership with  
Yeovil District Hospital and OASIS East

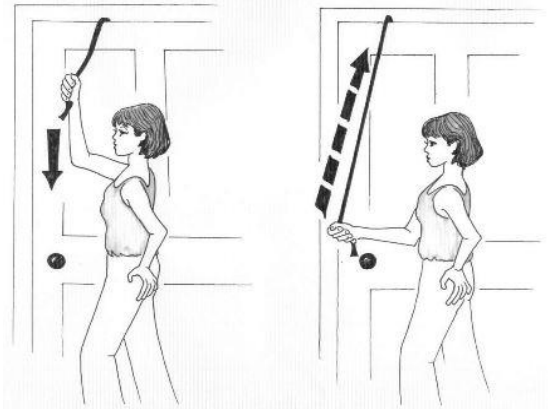
**Advice for patients**

Musculoskeletal Physiotherapy Service/Jul20/review Jan22

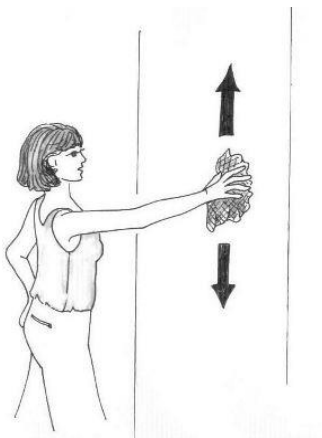
[www.somersetft.nhs.uk](http://www.somersetft.nhs.uk)

## Exercise 4 - use a piece of stretchy elastic

Tie a big knot at one end, loop it over the top of a door and then close the door. Now stand or sit sideways with the bad side closest to the door. Reach as far up the band as you can with the hand of the bad side. You can use your good arm to help the bad arm to reach higher or it may help if you initially pull the band down with the good arm and then hold on to it with the bad arm. The exercise involves pulling the band down as far as you can and then slowly control the release or upward movement of the band back to the starting position. Repeat this movement for as long as you can control it.



## Exercise 5 – standing facing the wall



Holding a cloth or duster against a smooth bare bit of wall or door. Slide your hand up the wall as far as you can and, if necessary, push the hand further up the wall with the good arm. Now allow the bad side hand to slide back down the wall but keep the movement slow and controlled. Repeat this exercise for as long as you can control the movement.

*Adapted from the Torbay Cuff Rehabilitation Programme with permission from Bobby Ainsworth and the Royal Berkshire NHS Hospital*

Somerset NHS Foundation Trust in partnership with  
Yeovil District Hospital and OASIS East



**outstanding care**  
**listening and leading**  
**working together**

**Advice for patients**

Musculoskeletal Physiotherapy Service/Jul20/review Jan22

[www.somersetft.nhs.uk](http://www.somersetft.nhs.uk)