

Extracorporeal shockwave lithotripsy for calcific tendonitis (tendinopathy) of the shoulder

**Understanding NICE guidance –
information for people considering the
procedure, and for the public**

November 2003



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Copies of this booklet can be ordered from the NHS Response Line; telephone 0870 1555 455 and quote reference number N0355. A version in Welsh and English is also available, reference number N0356. Mae fersiwn yn Gymraeg ac yn Saesneg ar gael hefyd, rhif cyfeirnod N0356. The NICE interventional procedures guidance on which this information is based is available from the NICE website (www.nice.org.uk). Copies can also be obtained from the NHS Response Line, reference number N0354.

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About this information

This information describes the guidance that the National Institute for Clinical Excellence (NICE) has issued to the NHS on a procedure called extracorporeal shockwave lithotripsy. It is not a complete description of what is involved in the procedure – the patient’s healthcare team should describe it in detail.

NICE has looked at whether extracorporeal shockwave lithotripsy is safe enough and works well enough for it to be used routinely for the treatment of calcific tendonitis of the shoulder.

To produce this guidance, NICE has:

- looked at the results of studies on the safety of extracorporeal shockwave lithotripsy and how well it works
- asked experts for their opinion
- asked the views of the organisations that speak for the healthcare professionals and the patients and carers who will be affected by this guidance.

This guidance is part of NICE’s work on ‘interventional procedures’ (see ‘Further information’ on page 10).

About extracorporeal shockwave lithotripsy for calcific tendonitis (tendinopathy) of the shoulder

Tendons are the tough cords that attach muscles to bones. Calcific tendonitis occurs most often in the tendons around the shoulder joint. The tendons become sore and swollen and this inflammation involves a build up of calcium. It can cause a number of symptoms, such as pain in the shoulder, arm and neck and difficulty moving the joint.

Treatments for calcific tendonitis include non-steroidal anti-inflammatory drugs, steroid injections, physiotherapy and a procedure that involves draining or washing out the shoulder joint. If these treatments have not worked, surgery is sometimes used. This can be conventional open surgery, in which a cut is made to expose the area needing surgery. Alternatively, the surgeon can make a smaller cut and operate using an instrument called an arthroscope to see inside the joint.

Extracorporeal shockwave lithotripsy (often shortened to ESWT) is an alternative to surgery. ESWT uses vibrations caused by sound waves to break up the calcium deposits. The sound waves come from a device applied to the outside of the body that generates short bursts of sound, called 'sonic pulses'.

How well it works

What the studies said

The studies that NICE looked at showed that ESWT improved the symptoms of people with calcific tendonitis. After treatment, people had less pain and better use of the joint. However, it was unclear how the intensity of the sonic pulses given affects how well ESWT works.

What the experts said

The experts noted there was not much evidence about this treatment's use. They considered it was not clear how much ESWT helps people with calcific tendonitis. In particular, there was not enough evidence to decide how the intensity of the sonic pulses given affects how well it works.

Risks and possible problems

What the studies said

According to the studies, people having this treatment had few complications. The most common problem reported was an accumulation of blood under the skin. However, it is not known if other problems rarely happen, or if they weren't recorded well in the studies that NICE looked at.

What the experts said

One expert thought that the most likely problem to occur with this procedure was pain during treatment. The majority of people having ESWT experienced some pain, although the amount varied. One expert reported a single case of severe damage to the bone in the upper arm, where it goes into the shoulder.

What has NICE decided?

NICE has considered the evidence on ESWT. It has recommended that when doctors use it for people with calcific tendonitis (tendinopathy), they should be sure that:

- the patient understands what is involved and agrees (consents) to the treatment, and
- the results of the procedure are monitored.

NICE recommends that doctors should report any serious problems that patients have after ESWT to the National Patient Safety Agency (NPSA).

What the decision means for you

Your doctor may have offered you ESWT. NICE has considered this procedure because it is relatively new. NICE has decided that the procedure is safe enough and works well enough for use in the NHS. Nonetheless, you should understand the benefits and risks of ESWT before you agree to it. Your doctor should discuss the benefits and risks with you. Some of these benefits and risks may be described above.

Further information

You have the right to be fully informed and to share in decision-making about the treatment you receive. You may want to discuss this guidance with the doctors and nurses looking after you.

You can visit the NICE website (www.nice.org.uk) for further information about the National Institute for Clinical Excellence and the Interventional Procedures Programme. A copy of the full guidance on ESWT is on the NICE website (www.nice.org.uk/IPG021guidance), or you can order a copy from the website or by telephoning the NHS Response Line on 0870 1555 455 and quoting reference number N0354. The evidence that NICE considered in developing this guidance is also available from the NICE website.

If you want more information on calcific tendonitis, a good starting point is NHS Direct (telephone 0845 46 47) or NHS Direct Online (www.nhsdirect.nhs.uk).

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