Ep #139: Exploring Your Neck (Part 5)

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With Your Host

Susi Hately

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Male Announcer: You're listening to *From Pain to Possibility* with Susi Hately. You will hear Susi's best ideas on how to reduce or even eradicate your pain and learn how to listen to your body when it whispers so you don't have to hear it scream. And now here's your host, Susi Hately.

Welcome and welcome. Back with this episode I'm continuing on with my miniseries on exploring the neck. And today we dig into the relationship between the neck and the rotator cuff.

And the reason I'm running this miniseries is because so often where the pain is not the problem. It's certainly an expression of a problem, it certainly needs to be addressed, but if we want to have longer lasting results, we need to look and understand the relationship between what's being expressed, I.e. the pain, and what's really going on.

And when you can tune and tap into some of the other relationships that might be not quite as loud, oftentimes they're not within our sphere of awareness. When we can become aware of those things, we can see what's more contributory or more correlated to what's going on.

You'll notice that I don't say causal and there is a big, big, big reason for this. And I just want to make mention of it before we get into the rotator cuff part of the discussion. And it's because there can be so many causes, from physical, emotional, mental. Like so many different layers of who we are as human beings that to say that this is the cause is tricky in my line of work.

So what I like to do, which I find super effective, is to simply step back and start to see the patterns. Because when we can see the patterns, whether it's within the layer of the physical realm, so the body, the tissue, or whether we're seeing the patterns between physical and mental, or physical and emotional, or just on emotional, or just on mental, when we see the bigger pattern, now we can make a more effective change because we see it in relationship to something else.

And I say relationship very deliberately because that is a significant and impactful piece to the recovery process. One part of the body is not injured in isolation, there's always a relationship to something.

Now, sometimes in the acute phases of a recovery process we can address the issue very specifically because it's so early on. But as time goes on or if there is a relationship when the injury happened and it's not addressed, then that's when some of these persistent patterns can start to be seated.

And certainly when we have a persistency of issue, we need to look beyond just the point because even if you are reducing symptoms, they're still in relationship to something. And when we can start to see these patterns, as I mentioned, we can make much greater and much more sustainable gains.

So with this episode we are getting into the rotator cuff. And what I want to go through is the anatomy of the rotator cuff, the relationship or a relationship to the neck just to kind of help you think about and kind of tune into yourselves. I'm going to walk you through an awareness exercise.

I'm also going to give you some suggestions on when you're doing rotator cuff exercises and how that can impact your neck or how it can make your neck better. A lot of people who have rotator cuff issues are already doing rotator cuff improvement exercises. So the ideas I'm going to give you today are just going to augment those things, okay? So let's get into it.

So the first thing that I want to discuss is the anatomy of the rotator cuff. The rotator cuff is a series of four muscles that connect and stabilize the head of the humerus, or the arm bone in the shoulder socket. And each of the four muscles arises from the shoulder blade, and their tendons blend into the articular capsule of the shoulder joint, and that creates a cuff of stability.

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Three of the four muscles rotate the head of the arm bone or the humerus, and collectively all four of their tendons blend in with the articular capsule to act like a cuff. Yeah, so rotator cuff.

So specifically, the four muscles are the infraspinatus, the teres minor, which snuggle just in below the spine of the shoulder blade. And then there's the supraspinatus, which cuddles in above the spine of that shoulder blade. And then there's the subscapularis, which settles in on the anterior surface of the shoulder blade between the shoulder blade and the ribcage.

And its role as a foursome is super important. Yet it doesn't act alone, nor can it act alone for maximum anatomical function. And now what I mean by that, is that the rotator cuff muscles arise on the shoulder blade. They attach on to the shoulder blade, which is normally movable and a relatively unstable structure.

It needs to be able to move in six directions: elevation, depression, retraction, protraction, upward and downward rotation in order for our arm to then do all the things whether it's raising up overhead, or coming in behind our back, or out to the side or in all the directions. And for the cuff to work properly, that shoulder blade must work properly.

And for the shoulder blade to work properly it's important that the muscles that stabilize the shoulder blade to function with ease, suppleness and balance. And so all of these muscle attached to the shoulder blade, and they also attach to the spine. So we've got the rhomboids, the middle and lower traps, we have the upper traps, levator scapula, and we have the serratus anterior.

Now, I'm not talking about all of the muscles that are impacting the shoulder blade, just a few of them just to kind of get your brain thinking. So we want to have balanced function here to support the rotator cuff function, right? Because if the blade is the place from which the rotator cuff is arising from, but the blade is not functioning well because this other tissue is not functioning well, then we can have some issue.

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Now we'll harken back to a couple of episodes ago when I talked about the primary stabilizing structure. And lo and behold, there's a series of muscles that I've just referred to that I also refer to as the primary stabilizing structure. So there's this real play between how that stability is arising in our upper body, how it impacts the neck, how it impacts the shoulder.

So it becomes really, really, really curious about the functioning between these parts. So it makes a lot of sense that when you have a rotator cuff injury or when there's an issue in the rotator cuff, that it can have a relationship to what you feel in your neck, just by way of the small number of muscular structures I've mentioned, right?

I haven't even spoken about the way the nerves are communicating or other muscles or other fascial structures even. So this is just a small sample size, just to kind of get you pondering and considering this relationship between your neck and your rotator cuff.

So now let's move into an awareness exercise. So I want to take you here, and then from the awareness I'm going to give you some considerations for when you're working with your rotator cuff and tuning into this relationship to your neck.

So bring your attention to your shoulder girdle and get a feel for where your collarbones are, where your shoulder blades are, and how the head of your arm bone settles into the shoulder socket. And allow for your breath to enter into and around your shoulder girdle, the armpit, between the ribs, and just noticing how it's filling out your shape.

So you might notice that your ribcage is moving, maybe a little, maybe a lot. You might notice your abdomen moving, maybe a little, maybe a lot. You might notice movement through your pelvis or your pelvic floor. And from this place of awareness now consider your shoulder blade.

So if you can reach it with your opposite hand, you can bring one of your hands back behind you to the opposite shoulder blade. And if you can't reach that, just bring your mind's eye to the back of your shoulder blade.

And then take your shoulders blades up towards your ears, and then start to bring them down towards your back.

And as you're bringing them up and down just notice, especially on the down, if you're using any extraneous muscles to do the movement. So a lot of times people will use their lower back muscles to try and pull that blade down.

And then let's pull the shoulder blades toward the spine and then let them rest back on the starting point. And then pull them back towards the spine and then let them rest. So you're retracting towards the spine, protracting away from the spine.

So now we're going to move your arm bone in the shoulder socket. And the first position I want you to move in is to bend your elbow to 90 degrees. And your hand is gently fisted, but not hard, just gently. And then you're going to rotate your arm bone in the socket. So if you were to look at your hand, and your hand is pointing towards 12 o'clock with your elbow bent at 90, you're going to rotate your arm bone in the socket so that hand moves toward either three o'clock or nine o'clock depending on which arm is up.

So if you got your right arm up, as you rotate it out you'll be moving towards three. If you've got your left hand or your left elbow bent, you'll be moving towards nine. It might be like 10 o'clock or two o'clock, it might not be all the way over, but it's this rotation through the shoulder socket.

And if you can reach behind you with the opposite hand, and you place your fingers close to where your arm bone connects into your torso you'll be able to feel the muscles contract on the backside of you as the arm bone starts to move into rotation. And see if you can do the rotation without your shoulder blade moving.

Okay, so that's the basic movement. Your elbows are bent at 90, and one at a time is a great place to start of just rotating that arm bone in the socket. Notice if you wanted to set your shoulder blades, like pull them down to your back pockets. Can you let your blades be at ease? And if you notice

that the blades want to rise as you do the rotation, can you perhaps only move that arm bone in the socket into rotation only as far as the blades don't move. So the blades are quiet.

Once you've got this awareness, now bring your awareness to your neck into your jaw and your face. And as you're doing this movement, what are you feeling up in your neck, your jaw or your face? What are you noticing with your breath? Does your breath change?

Is there a point through the range of motion that you begin to feel something pokey, or tingly, or nippy, or painful, or bracy, or grippy, or any number of words that might describe it? Whether it's in the ribcage area, or down your back, or further up your neck or like up by the occiput behind the back of your skull. Are you wanting to drive the movement by gripping your hand or using your forearm more than using the arm, like the actual muscles of the shoulder joint, the rotator cuff?

Okay, so now let your arms become straight. And I want you to imagine, and by straight I mean the hand is pointing down to the floor. So they're just hanging beside you. So I want you to bring your attention to one of your arms and then imagine that your hand has a flashlight attached to it or a paintbrush that's full of paint. And you're going to rotate your arm bone in the shoulder socket, and you're going to create an arc on the floor.

Now, obviously, your hand is not going to touch the floor if you're seated or standing. But the idea is that the light shining onto the floor or the paintbrush that's full of paint is going to create a mark or an arc as you rotate the arm in the socket.

So we're playing around with rotation again, but I'm doing this in a very specific way because I want you to notice if you're driving the movement from your forearm. Because your forearm can move into supination and pronation.

So bend the arm again for a second. And now move your forearm and you'll see as your hand can come up to the palm can face you and then

you can turn the palm down. Supination is with palm up. Pronation is with the palm down. But that movement can happen entirely through the forearm, which is supination pronation.

You can do that same thing, supination and pronation, with that hand pointing towards the floor. Where I want you to focus though is up at your shoulder joint. And I want you to generate that movement at the shoulder joint, not at your forearm.

So allow your brain to go to the shoulder joint and allow for that movement to happen at that shoulder joint. And can you allow the forearm to just go for the ride? Can you allow the hand to go for the ride, creating that arc as if you had the flashlight attached to the bottom of the hand or a big painty paintbrush.

Now, as you do it, notice what's going on up further the chain into your neck or up into your skull or into your back. Where else are you utilizing muscular effort? Because ultimately, this is a pretty low load exercise, ultimately. So are you utilizing other parts of your body to do the movement?

And that becomes really, really interesting, especially if your neck is involved given what this miniseries is about. Because you can start to then take a look, okay, when you had your elbow bent, did that have an impact on your neck versus when your elbow was straight and pointing down towards the floor? Was there a particular range when you rotated out or when you came back in? Was that where that impact or that significance was?

Could you find a reduction of symptom when you made the range a little smaller? These are all clues to help you toward improving your neuromuscular patterns, for helping you improve or reduce your compensatory strategies or your compensatory patterns. And for you to discern or to see if there is a relationship between the way the shoulder is functioning and we've got the lens of the rotator cuff with this episode, how

that function might impact your neck and what's being expressed at your neck.

So can you allow yourself to just notice, yeah? Now sometimes this can get a bit frustrating because it's like, “Oh, Susi, do I have to move so slowly? Do I have to move in a smaller range of motion?” And my answer is, well, no, you don't have to do anything. And notice what happens when you do.

Because if you're someone who's got a great range of motion and you're compensating like crazy, I love it. Because you have the ability to do the movement, you're just doing it in a way that’s sub optimal, right? You could do it much, much better. So when you get the foundational base movement patterns sorted out, the gains you're going to make are really terrific.

So to pull yourself back might be frustrating, because you're like, “Oh, will I ever get back to that range of motion?” And the answer is, yeah, absolutely. But if you put the cart before the horse, if you try and make it happen too fast, you might be creating tension in the process. And then the patterns will take way longer to shift. So just notice if your ambition is overriding your patience, yeah?

So then where I want to take you next is to if you do have an injury in your rotator cuff, or you do have an issue in your rotator cuff and you're suspecting that there is a relationship to your neck, you've been prescribed rotator cuff exercises, here are some things to consider when you're doing them.

The first is, if you are developing more strain in your body, consider making the movements a little bit smaller or dropping the weight, or and noticing if you're really bracing with your shoulder blade. I realize that in a lot of rehabilitation models, setting the shoulder blade is a very common practice.

And I'm not against the practice at all. However, when I see a lot of people set their shoulder blades, they're doing really anything but. They're utilizing their neck, their jaw, their lower back, their QLs. They're doing all sorts of other compensatory strategies in an effort to set their shoulder blades. It's

why I like to say to people, or at least suggest to people can you do the movement with your shoulder blades quiet?

Ultimately, in my mind, we want to train ourselves to have responsive tissue as opposed to set or braced tissue. I get the reason why professionals are asking people to set the shoulder blades and in time, for sure, we want to then get to a place of creating more responsivity because we don't walk around during our day with set shoulder blades, right?

Our arms are holding on to a steering wheel, they're bringing the arm back to parallel park, they're raising their arm up to put something up into the cupboard or the closet. They're picking kids up, right? There's all these different ranges of movement that we're being asked to do, which they don't necessarily benefit from over the long term from a set shoulder blade.

So just keep that part in mind and then notice if you are over utilizing or over utilizing your forearm and you think you're doing a rotation of that arm bone in the socket, you think you're using your rotator cuff. But in fact, you're using your forearm. You're driving from your forearm, which can then lead to issues down through your elbow, and through your hand, and through your wrist.

So consider those things. And then also notice when you're doing the rotator cuff work, especially if you're doing the rotation bits, is watch where the elbow goes. So sometimes we'll get into rotation, but the elbow will kind of move as well as that arm bone in the socket. We want to keep that upper arm quiet from the start of the movement.

So if the movement itself is you're meant to move that elbow because the arm bone is moving into abduction, or extension, or into flexion, then go for it. But if your arm is staying static and all you're doing is rotating, if you're doing rotation, then that elbow is going to be pointing at whatever position it started pointing in.

So if your elbow is bent and you're doing the rotation, like I walked you through a moment ago, that elbow is pointing backward, right and then it's

not moving from that point. If it starts to veer away from your body more and you see more space between your torso and your arm, then that elbow or that arm, that arm has has moved more into abduction and you're no longer doing pure rotation. So by noticing where your elbow is placed, it gives you an indication of what your arm in the socket is actually doing.

So those are a few different ways to think about what's going on in your rotator cuff and how it might be related to your neck issue. So consider as you're doing your exercises, as you're doing your practices, what you're doing through the rest of your body, and how you can support the rest of your body to support your rotator cuff, which could support your neck.

Now, if this has resonated with you, and you want to dig in deeper, November 14, 15, and 16 I am running Power of Pure Movement: Unwinding and Unraveling Your Neck. And you can still register, we're starting on Monday. If you can't make the program, but you want the information, you don't have to attend live, but you do need to register. So if you register for it, you will get the recordings when the workshop training is done on Thursday. Okay?

All you need to do is go to learn.functionalsynergy.com/neck and it would be a delight, delight, delight to be able to work with you. Take good care, see you next time.

If this episode has resonated and you're looking to deepen this idea of getting your body back on board, of listening deeply to your symptoms, of listening to the whispers so you don't have to hear the screams and you're looking for one to one support or professional training, then reach out to us at health@functionalsynergy.com where we can customize your learning path. That's health@functionalsynergy.com. Looking forward to hearing from you.