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**Clinic Hours: Monday-Thursday 9:00 am- 12:00 pm & 2:00 pm- 6:00 pm Friday 8:30 am- 12:00 pm
Friday 1:00 pm- 5:00 pm & Saturday 8:00 am-11:00am
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ALL YOU EVER WANTED TO KNOW ABOUT BURSITIS:

What is bursitis?

Bursitis is inflammation of a bursa. A bursa (the plural form is bursae) is a tiny fluid-filled sac that functions as a gliding surface to reduce friction between tissues of the body. There are 160 bursae in the body. The major bursae are located adjacent to the tendons near the large joints, such as the shoulders, elbows, hips, and knees.

What causes a bursa to become inflamed?

A bursa can become inflamed from injury, infection (rare in the shoulder), or due to an underlying rheumatic condition. Examples of bursitis include injury as subtle as lifting a bag of groceries into the car to inflame the shoulder bursa (shoulder bursitis), infection of the bursa in front of the knee from a knee scraping on asphalt (septic prepatellar bursitis), and inflammation of the elbow bursa from gout crystals (gouty olecranon bursitis).

What are bursitis symptoms and signs?

The symptoms of bursitis are directly related to the degree of inflammation present in the bursa. The inflamed bursa can cause localized pain and tenderness. If the bursa is so inflamed that swelling occurs, it can cause local swelling and stiffness, sometimes associated with local redness and warmth. The inflammation can make it painful to support body pressure. For example, hip bursitis can make it difficult to lay on the affected side of the hip. Bursitis in the knee, for another example, can make it painful to lay with the knees touching each other.

How is bursitis diagnosed?

Bursitis is typically identified by localized pain or swelling, tenderness, and pain with motion of the tissues in the affected area. X-ray testing can sometimes detect calcifications in the bursa when bursitis has been chronic or recurrent.

What is the treatment for bursitis?

The treatment of any form of bursitis depends on whether or not it involves infection. Bursitis that is not infected (from injury or underlying rheumatic disease) can be treated with ice compresses, rest, and anti-inflammatory and pain medications. Occasionally, it requires aspiration of the bursa fluid. This procedure involves removal of the fluid with a needle and syringe under sterile conditions. It can be performed in the doctor's office. Sometimes the fluid is sent to the laboratory for further analysis. Noninfectious bursitis can also be treated with a cortisone injection into the swollen bursa. This is sometimes done at the same time as the aspiration procedure and typically rapidly reduces the inflammation of the swollen bursa.

Infectious (septic) bursitis requires even further evaluation and aggressive treatment. The bursal fluid can be examined in the laboratory to identify the microbes causing the infection. Septic bursitis requires antibiotic therapy, sometimes intravenously. Repeated aspiration of the infected fluid may be required. Surgical drainage and removal of the infected bursa sac (bursectomy) may also be necessary. Generally, the adjacent joint functions normally after the surgical wound heals.

Bursitis At A Glance

- Bursitis is inflammation of a bursa, a tiny fluid-filled sac that functions as a gliding surface to reduce friction between tissues of the body.
- A bursa can become inflamed from injury, infection (rare in the shoulder), or due to an underlying rheumatic condition.
- Bursitis is identified by localized pain or swelling, tenderness, and pain with motion of the tissues in the affected area.
- Treatment of bursitis is directed toward reducing inflammation and treating any infection present.