

**STEVEN CHUDIK MD**  
**SHOULDER, KNEE & SPORTS MEDICINE**

## Osteochondroma of the Shoulder/Arm

An osteochondroma is a formation of extra bone and cartilage that can develop in various parts of the body. In the shoulder, it most commonly occurs along the shoulder blade (scapula) but may also appear along the humerus. This non-cancerous tumor is often asymptomatic, or it may cause pain and discomfort as the surrounding muscle and soft tissue may catch or rub during activity.



X-ray of humeral osteochondroma

### Frequent Signs and Symptoms

Often there is no pain with this condition, and it is detected when x-rays are taken for other reasons. Other times, symptoms can include the following:

- Tenderness over the osteochondroma
- Shoulder pain with motion
- Visible or palpable lump under the skin
- Occasionally, numbness and tingling, or a change in blood flow related to pressure from the growth



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- “Snapping” sensation as muscle tendons move over the osteochondroma
- Pain with swelling if the growth has fractured off the bone

### **Etiology (Causes)**

The osteochondroma tends to form near growth plates in the younger population and can grow as the patient’s bones grow.

### **Risk Factors**

- Under age 30

### **Outcomes**

As many osteochondromas do not cause pain or functional problems, those patients can be monitored with interval X-rays to track growth. Symptomatic osteochondromas can be surgically removed with a simple outpatient procedure.

### **Potential Risks and Complications**

- Osteochondromas occurring in other locations
- Persistence or recurrence of tumor
- Damage to nerves, vessels, or muscle tissues due to pressure or impingement from the benign growth
- Risks of surgery include infection, bleeding, injury to nerves, and shoulder stiffness
- In rare cases, the growth can convert to a chondrosarcoma
- Growth of the osteochondroma can push on adjacent structures and cause painful separation of the bones near a joint

### **Treatment Considerations**

Initial treatment consists of medications and ice to relieve pain and discomfort. Patients can also avoid aggravating activities. However, for patients that are at risk for nerve or vascular damage, distortion of bone position, or have symptoms due to the growth’s prominence under the skin, surgery is indicated to remove the osteochondroma.

### **Possible Medications**

- Nonsteroidal anti-inflammatory medications, such as aspirin and ibuprofen (DO NOT take within seven days before surgery), or other minor pain relievers, such as acetaminophen, are often recommended. Take these as directed by your physician. Contact your physician immediately if any bleeding, stomach upset, or signs of an allergic reaction occur.
- Pain relievers are usually not prescribed for this condition, although your physician may prescribe these following surgery. Use only as directed and only as much as you need.



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- Corticosteroid injections into the bursa may be administered to reduce inflammation, although this is not usually recommended

### **Modalities (Cold Therapy)**

Cold is used to relieve pain and reduce inflammation. Cold should be applied for 15 to 20 minutes every two to three hours for inflammation and pain and immediately after any activity that aggravates your symptoms. Use ice packs or an ice massage with a cloth between the ice and your skin to prevent burning /freezing your skin.

### **Notify My Office If Symptoms Worsen**



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