
Bursitis

Summary

- Bursitis is caused by the inflammation of a bursa.
 - A bursa is a small fluid-filled sac that acts as a cushion between bone and soft tissue.
 - Common causes of bursitis include injury and overuse.
 - Treatment includes rest, ice packs, gentle mobilisation exercises and avoiding the activity that prompted the condition.
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What is bursitis?

Bursitis is caused by the inflammation of a bursa. A bursa is a small fluid-filled sac that acts as a cushion between bone and soft tissue (muscles, tendons and skin). A bursa (plural bursae) reduces friction and assists joint movement.

When you overuse or injure a joint, a nearby bursa can become irritated or inflamed. The bursa fills with excess fluid, causing significant pain and restricting movement.

Symptoms of bursitis

The symptoms of bursitis may include:

- localised pain
- swelling
- a warm feeling in or around the affected area
- increased pain at night
- pain that becomes worse on movement
- stiffness
- reddening of the skin in the affected area.

The shoulder, elbow, hip, knee and heel are the most common sites of bursitis.

Causes of bursitis

Injury, repeated pressure and overuse are common causes of bursitis. Some conditions, such as rheumatoid arthritis, gout and diabetes, can also contribute to its development.

Being overweight can increase your risk of developing hip and knee bursitis.

An infection can also cause bursitis. This may occur if a joint is injured and bacteria get into the bursa.

Overuse injury

A common cause of bursitis is overuse of a joint, especially if that activity is performed awkwardly or with considerable pressure. Doing the same kinds of movements every day or putting stress on joints increases the risk of developing bursitis.

Examples of work-related activities that may trigger bursitis include production-line packing, laying carpet and typing. Sports that can cause bursitis include jogging, tennis and squash.

Diagnosing bursitis

Bursitis is generally detected as a tender, warm swelling at the site of a bursa. A diagnosis may include investigating and ruling out any other possible causes.

Tests performed to confirm or rule out bursitis may include:

- physical examination
- medical history
- x-rays, to rule out the possibility of any other condition
- ultrasound
- taking fluid from the bursa to rule out the possibility of infection.

Treating bursitis

Treatment will depend on the cause of the bursitis, and aims to relieve the symptoms as much as possible while the healing process takes place.

Treatment options may include pain-relieving medications, cold packs, gentle mobilising exercises and rest. Anti-inflammatory medications or injections of corticosteroids may be used in cases of severe pain.

If infection is present, as well as pain and swelling of the affected area, you may develop other symptoms, such as a raised temperature. Treatment with an appropriate antibiotic is necessary.

If the bursitis was triggered by a particular form of overuse, it's important to avoid that activity, or modify how you perform that activity. An occupational therapist can help you find solutions to this problem.

Correct posture and joint protection are useful, and braces or splints can decrease the stress on the areas and support good alignment.

Long-term management of bursitis

Your doctor, physiotherapist or occupational therapist can offer suggestions and strategies to reduce your risk of developing bursitis again.

To prevent work-related bursitis:

- Use ergonomically-designed furniture and equipment.
- Take regular breaks.
- Do simple stretching exercises regularly throughout your day.
- Keep benches at waist height so that your shoulders can relax.

To prevent sport-related bursitis:

- Warm up thoroughly by stretching and gently going through the motions of your chosen sport.
- Make sure you use the correct technique and regularly practice strengthening and conditioning exercises that complement your particular sport.
- Cool down thoroughly with gentle, sustained stretches.
- Make sure footwear and equipment are appropriate for you.

Where to get help

- Your **GP (doctor)**
- **Physiotherapist**
- **Occupational therapist**
- **Musculoskeletal Australia** National Help Line Tel. **1800 263 265**
- **Australian Physiotherapy Association** Tel. **1300 306 622**

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