

Calcific tendinopathy

Patient information factsheet

- Calcific tendonitis is caused by calcium building up in your tendons.
- These calcium deposits can accumulate in one area of your body, or in more than one area.
- If the deposits grow bigger or become irritated, they can cause severe pain.
- Calcific tendonitis most often affects the shoulder or rotator cuff, but it can happen anywhere in the body. my.clevelandclinic.org/health/body/rotator-cuff

Calcific tendinopathy symptoms

People with calcific tendonitis may develop several different symptoms. These include:

- ✓ Sudden shoulder pain or stiffness.
- ✓ Intense pain with shoulder movement.
- ✓ Severe pain that disrupts sleep.
- ✓ Reduced range of motion.
- ✓ Rotator cuff tenderness.

What causes calcific tendinopathy

- Aging and wear and tear can eventually lead to calcific tendonitis.
- Healthcare experts are not sure why some people develop the condition and others do not.

Who does calcific tendonitis affect?

- People between the ages of 30 and 60 have a higher risk for calcific tendonitis.
- Women are also slightly more likely to be affected than men.
- Calcific tendonitis can happen to anyone and is not associated with any particular activity.

How common is calcific tendonitis?

- Calcific tendonitis is not very common.
- The condition occurs in less than ten per cent (10%) of people being treated for shoulder pain.

How is calcific tendonitis diagnosed?

- A Physiotherapist can provide a clinical diagnosis of shoulder impingement syndrome. This happens when the muscles and tendons in your shoulder get pinched or squeezed. However, a clinical assessment alone is not able to reliably diagnose calcific tendinopathy.
- A diagnostic ultrasound scan is required to get a full and accurate diagnosis of the cause of your shoulder pain.
- Having a correct diagnosis is essential, allowing for the most appropriate and effective treatment strategy to be put in place.

What other conditions are like calcific tendinopathy?

If this does not sound like your pain, there are other conditions that can mimic the pain of calcific tendinopathy such as:

1. acromio-clavicular (AC) joint osteoarthritis www.ultrasound-guided-injections.co.uk/acromioclavicular-joint-pain/
2. frozen shoulder www.ultrasound-guided-injections.co.uk/frozen-shoulder/
3. shoulder impingement www.ultrasound-guided-injections.co.uk/shoulder-impingement/
4. rotator cuff pain www.ultrasound-guided-injections.co.uk/rotator-cuff-pain/
5. sub-acromial bursitis www.ultrasound-guided-injections.co.uk/shoulder-bursitis/
6. shoulder joint osteoarthritis www.ultrasound-guided-injections.co.uk/shoulder-osteoarthritis/

Calcific tendinopathy versus frozen shoulder

- Calcific tendinopathy is more common in the younger age groups (20 to 40 years old).
- Frozen shoulder is more likely to be experienced by middle aged people (40 to 60 years old).
- Both calcific tendinopathy and frozen shoulder cause a lot of pain, especially at night, and make it harder to move your arm.
- Calcific tendinopathy tends to come on quickly, whereas frozen shoulder develops over a longer period.

What can I expect if I have calcific tendonitis?

- Most of the time it can be addressed and resolved quickly.
- Regular checks by your healthcare provider are essential, especially if you have had the condition before.

Calcific tendinopathy treatment

Non-operative:

- non-steroidal anti-inflammatory drugs (NSAIDs) like ibuprofen, physical therapy, stretching & strengthening or steroid injections
- extracorporeal shock-wave therapy (a non-invasive sound wave treatment)
- ultrasound-guided needle lavage (a medical procedure used to flush out a joint), or needle barbotage (a medical procedure that helps remove calcium crystals from a joint).

Operative:

- surgical decompression (an operation to relieve pressure) of calcium deposits.

How long does it take to recover from calcific tendonitis surgery?

- In most cases, recovery after surgery takes about six weeks.
- You may need to wear a sling to keep your shoulder from moving too much.

How can I reduce my risk for calcific tendonitis?

- Though calcific tendonitis can't be prevented altogether, there are steps you can take that may reduce your risk.
- For example, if you develop pain in your shoulder, don't participate in any strenuous activities until you have it checked out by your healthcare provider.

More information

Calcific Tendinopathy (also known as Calcific Tendinitis) www.ultrasound-guided-injections.co.uk/calcific-tendinopathy/

Rotator cuff injuries and disorders patient.info/bones-joints-muscles/rotator-cuff-disorders

Musculoskeletal Clinical Assessment and Treatment Service (MSK CATS) and Physiotherapy Services

Tel.: 0207 288 3317 Email: whh-tr.mskinterfaceservice@nhs.net

Contact our Trust

If you have a compliment, complaint or concern, please contact our Patient advice and liaison service (PALS) on **020 7288 5551** or whh-tr.PALS@nhs.net.

If you need a large print, audio or translated copy of this leaflet, please email whh-tr.patient-information@nhs.net. We will try our best to meet your needs.

020 7272 3070 | Whittington Health NHS Trust, Magdala Avenue, London, N19 5NF
www.whittington.nhs.uk | x.com/WhitHealth | facebook.com/WhittingtonHealth

Document information

Date published: 27/05/2025 | Review date: 27/05/2027 | Ref: ACS/MSKCATS/CalcTend/01
© Whittington Health NHS Trust. Please recycle.