

Common Soft Tissue Musculoskeletal Pain Disorders



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KEYWORDS

- Soft tissue rheumatism • Soft tissue pain • Localized pain disorders
- Musculoskeletal pain disorders

KEY POINTS

- Most soft tissue musculoskeletal pain syndromes can be diagnosed by history and physical examination.
- The overall goal for management of musculoskeletal pain is to improve comfort and restore, maximize, and preserve function.
- The mainstay of therapy for these syndromes is a combination of avoidance of the aggravating activity, education, and physical therapy.
- A formal physical therapy evaluation provides patient-centered care for each syndrome, which may manifest as unique musculoskeletal impairments.
- Analgesics and nonsteroidal anti-inflammatory drugs (NSAIDs) can be used judiciously. Corticosteroid injections and surgical therapies should be considered with failure of conservative therapy.

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INTRODUCTION

Musculoskeletal complaints account for up to 30% of all primary care office visits.¹ Soft tissue musculoskeletal pain syndromes manifest in isolation or secondary to underlying mechanical derangements or systemic inflammatory disease. Common causes of soft tissue musculoskeletal pain include tendinitis, enthesitis, and bursitis. Tendinitis is a clinical and pathologic disorder with common features of local pain, dysfunction, tenderness, inflammation, and degeneration, often resulting from over-use and injury.¹ Enthesitis is defined as inflammation occurring at the bony insertional sites of tendons and ligaments, and bursitis is inflammation of bursae that protect soft tissues from bony prominences and friction associated with structural motion. Tendinitis, enthesitis, and bursitis may have overlapping clinical features of local tenderness, swelling, pain with motion and/or at rest, and regional loss of active motion.¹

The purpose of this article is to give a brief overview of the most common soft tissue musculoskeletal pain syndromes that primary care providers will encounter, to be used as a reference and guide. The authors used a regional approach to organize the material, as providers will encounter these syndromes with complaints of pain referring to an anatomic location (eg, neck, shoulder, or hip pain). A comprehensive review of soft tissue pain syndrome is not possible in this article, but a list of soft tissue causes of pain by region is organized in [Table 1](#).

Table 1 List of common localized soft tissue pain disorders by anatomic region			
Head and Neck	Temporomandibular joint syndrome	Carotodynia	Stylohyoid syndrome
	Omohyoid syndrome	Muscle contraction headache	Occipital neuralgia
	Torticollis	Cervical nerve root impingement	Thoracic outlet syndrome
Chest Wall	Costochondritis	Xiphodynia	Tietze syndrome
Shoulder	Rotator cuff tendinopathy	Bicipital tendinopathy	Deltoid tendinopathy
	Subacromial bursitis	Rotator cuff tear	Adhesive capsulitis
Elbow	Olecranon bursitis	Lateral and medial epicondylitis	Cubital tunnel syndrome
Wrist	De Quervain disease	Intersection syndrome	Carpal tunnel syndrome
Hand	Stenosing tenosynovitis (trigger finger and thumb)	Dupuytren contracture	
Hip and Pelvic Girdle	Trochanteric bursitis	Ischial bursitis	Iliopectineal bursitis
	Piriformis syndrome	Meralgia paresthetica	
Knees	Prepatellar bursitis	Pes anserine bursitis	Patellofemoral syndrome
	Iliotibial band syndrome	Baker cyst	Shin splints
Ankle/Foot	Retrocalcaneal bursitis	Achilles tendinopathy	Plantar fasciitis
	Metatarsalgia	Tarsal tunnel syndrome	Morton neuroma

EPIDEMIOLOGY

Population studies reveal a high prevalence of soft tissue musculoskeletal pain syndromes. The proportion of pain caused by specific disorders in comparison with nonspecific pain is less clear. Upper limb pain is common, with a high prevalence in

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