# **Are Pendular Shoulder Exercises Worthwhile?**

Gregory Cunningham,<sup>1</sup> MD, Caecilia Charbonnier,<sup>2</sup> PhD, Sylvain Chagué,<sup>2</sup> MS, Alexandre Lädermann,<sup>1,3,4</sup> MD, David H. Sonnabend,<sup>5,6</sup> MD

<sup>1</sup>Division of Orthopaedic and Trauma surgery, Geneva University Hospitals, Switzerland.

<sup>2</sup>Artanim Foundation, Medical Research Department, Geneva, Switzerland

<sup>3</sup>Faculty of Medicine, University of Geneva, Switzerland.

<sup>4</sup>Division of Orthopaedics and Trauma Surgery, Clinique La Colline, Geneva, Switzerland.

<sup>5</sup>Department of Orthopaedic and Traumatic Surgery, Royal North Shore Hospital, Sydney, Australia.

<sup>6</sup>Institute of Bone and Joint Surgery, University of Sydney

## Abstract

#### Aim

The aim of this study was thus to quantify GH motion during pendular exercises with the hypothesis was that they involved little if any true glenhumeral (GH) motion.

# **Background**

Codman's pendular exercises have been widely used for decades with the intention of passively mobilizing the GH joint while not compromising recently injured or repaired tissues. However, no studies have yet shown that they actually result in true GH movement.

### **Methods**

10 healthy volunteers were involved in this study. Shoulder kinematics wereanalyzed based on a validated biomechanical model coupling patient-specific imaging and motion capture, during which participants were instructed to perform medio-lateral, antero-posterior and circular pendular exercises. GH range of motion (ROM), scapulothoracic (ST) ROM,thoracohumeral (TH) ROM and overall exercise amplitude were calculated for each sequence. Linear regression analyses were carried out to determine any association between different components of shoulder motion

#### Results

Mean overall exercise amplitudes were  $36.48^{\circ}\pm9.74^{\circ}$  (range, 25.38 to  $56.39^{\circ}$ ) for medio-lateral exercises,  $38.3\pm14.97^{\circ}$  (range, 20.68 to  $64.99^{\circ}$ ) for antero-posterior exercises, and  $21.44^{\circ}\pm7.72^{\circ}$  (range, 14.01 to  $35.49^{\circ}$ ) for circular exercises. Mean GH and ST involvement remained minimal, ranging from 4.88 to  $10.77^{\circ}$ , and  $1.4^{\circ}$  to  $4.19^{\circ}$ , respectively. There was no significant correlation between overall exercise amplitudes and GH (R = 0.38, p = 0.01) or ST amplitudes (adjusted R2 = 0.3, p = 0.006).

## **Conclusions**

This study demonstrates that Codman pendular exercises depend mainly on truncal movement, and produce very little movement of the GH and ST joints. The use of these exercises for passive shoulder rehabilitation is thus questionable.