

PATIENT & CAREGIVER EDUCATION

Bursitis

This information will help you understand bursitis, including causes, diagnosis, and treatment.

About Your Bursae

Your bursae are small pads filled with fluid that act as cushions between your bones, tendons, and the muscles near your joints (see Figure 1). There are over 150 bursae in your body.

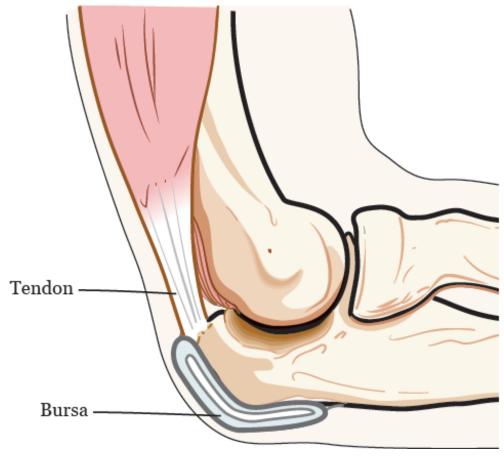


Figure 1. Bursitis

When a bursa swells, you get a painful condition called bursitis. Bursitis

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usually happens in the shoulder, elbow, hip, and knee.

Causes of Bursitis

There are many causes of bursitis, including:

- Wearing tight-fitting shoes
- Kneeling, sitting, or lying on your side for long periods
- Stressing or overusing a joint by bicycling, running, playing tennis, throwing a ball many times, or carrying heavy objects
- Injuries, especially falls
- Aging
- Poor posture
- Irritation of a bursa from:
 - Joint surgery or surgically implanted hardware, such as a hip replacement
 - Bony growths on the edges of your bones (bone spurs) or calcium deposits on your tendons
 - Other medical conditions including gout, diabetes, rheumatoid arthritis, and thyroid disease

Symptoms of Bursitis

Common symptoms of bursitis include:

- Pain, stiffness, swelling, or discomfort around your elbow, hip, knee, shoulder, or other joints. You may feel this while you're moving or at rest.
- Loss of movement due to pain and swelling.

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Diagnosis of Bursitis

Your healthcare provider can usually tell if you have bursitis based on your symptoms and a physical exam. They may give you a blood test and x-rays to rule out other possible problems. If there are signs of infection, you may need to have an aspiration. An aspiration is a procedure that removes a small amount of bursa fluid with a needle.

Treatment for Bursitis

Your treatment may include rest, medications, icing your joint, occupational or physical therapy, steroid injections, or draining the fluid (aspiration). Your healthcare team will make treatment recommendations based on your symptoms.

The goal of treatment is to:

- Reduce pain and inflammation.
- Maintain the use of your joint.
- Help prevent bursitis from coming back.

Rest

Rest your joints and avoid activities that cause pain and worsen your symptoms.

Medications

Your healthcare provider may recommend that you take nonsteroidal antiinflammatory drugs (NSAIDs). Some of these you can buy over-the-counter (medications you buy without a prescription). Some examples of NSAIDs include:

- Ibuprofen (Advil®, Motrin®)
- Celecoxib (Celebrex®)
- Naproxen (Aleve®, Naprosyn®)

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- Diclofenac (Voltaren®)
- Mobic (Meloxicam®)

NSAIDs may have side effects. Talk with your healthcare provider before taking NSAIDs.

Ice

Your healthcare provider may tell you to ice your joints. Apply ice for no longer than 15 minutes every 4 to 6 hours.

Rehabilitation therapy

Your healthcare provider may refer you to an occupational or physical therapist. Your therapist will:

- Show you exercises that will strengthen your joints.
- Tell you how to protect your joints, which helps healing and prevents bursitis from coming back.
- Provide an ultrasound, massage, or other therapies.

Steroid injections and fluid draining

If your symptoms continue or get worse, your healthcare provider may inject a steroid into the area surrounding your joint. This will help to decrease swelling and pain. For more information about steroid injections, read our resource *Steroid Injections* (www.mskcc.org/pe/steroid injections).

If you have bursa fluid, your healthcare provider may also drain the fluid in your joint using a needle. This will help to relieve pain.

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If you have questions or concerns, contact your healthcare provider. A member of your care team will answer Monday through Friday from 9 a.m. to 5 p.m. Outside those hours, you can leave a message or talk with another MSK provider. There is always a doctor or nurse on call. If you're not sure how to reach your healthcare provider, call 212-639-2000.

For more resources, visit www.mskcc.org/pe to search our virtual library.

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