

# Health Tips

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with

Dr. D



Printer Friendly



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## Health Tip: Tennis (Elbow) Anyone?

Tennis elbow is one of the most inappropriately named conditions in medicine. Of the hundreds of patients that I have treated with tennis elbow, relatively few have been tennis players. From my experience, it may just as well have been named, "I-shouldn't-have-painted-the-whole-house-this-weekend elbow". Let's look at what causes this very common condition and how it's managed.

### What is tennis elbow?

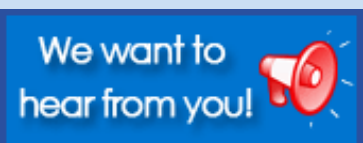
Tennis elbow is an overuse injury, affecting an area of the elbow called the lateral epicondyle. This is the point at which the forearm muscles and tendons attach. Tennis elbow, known in the medical literature as "lateral epicondylitis" develops as a result of repetitive use of the forearm muscles, as when raising and lowering or rotating the hand and wrist. Examples of these motions include hammering or use of a screwdriver. When it does occur in tennis players, it is usually the result of a one-handed backhand with poor technique or a late forehand swing. Repetitive "micro-trauma" then leads to small tears at the bone-tendon interface with ensuing inflammation.



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## How do you know if you have tennis elbow?

The signs and symptoms of tennis elbow may include 1) pain at the bony prominence on the outside (lateral aspect) of the elbow, 2) pain which is worse when squeezing objects or shaking hands, 3) the sensation of weakness when attempting to grip or lift because of discomfort.

## How Is Tennis Elbow Diagnosed?

There are no blood tests or x-ray findings that help with making the diagnosis of tennis elbow. The diagnosis can almost be made from a description of the pain alone, since there are only a few other elbow problems that affect that region of the elbow. A few simple physical maneuvers performed by the doctor serve to confirm the diagnosis. Pain near the elbow when the wrist is extended (bent backwards, like revving a motorcycle engine) against resistance is one of the most consistent physical findings. Sometimes, other tests, such as a nerve conduction study or MRI may be recommended, but this is done to rule out other conditions rather than to confirm the diagnosis of tennis elbow.

## How is tennis elbow treated?

Initial treatment of tennis elbow usually involves measures to decrease inflammation such as the application of ice and taking medications such as ibuprofen (Advil, Motrin, etc.) or naproxen (Aleve). Since this is an overuse injury, it is essential that the repetitive activity that was responsible for its development is stopped or modified. If self-care is ineffective, other treatment measures include:

- **Physical therapy.** Once the initial inflammation has calmed down, a gradual [stretching and strengthening program](#) can increase strength and endurance, increase functional activities and promote a return to normal function.
- **Corticosteroids.** For severe or persistent pain, corticosteroids (not the type that make you look like Hulk Hogan) can help to reduce pain and inflammation. Most commonly, the steroid is delivered by injection into the painful region at the outside of the elbow (ouch), but steroids can also be delivered relatively painlessly via a physical therapy modality called phonophoresis.

- **Counterforce bracing.** This is the so-called tennis elbow strap. There are a variety of these available at most sporting goods stores. They should be placed around the forearm, just distal to the bony prominence (lateral epicondyle) of the elbow. This helps to take some of the stress off of the muscle-tendon-bone unit at the elbow with movements of the hand and wrist.



- **Surgery.** 90 to 95% of people with tennis elbow will improve with conservative treatment. Only rarely is surgery necessary to repair the injured muscle-tendon attachment to the lateral epicondyle.

## Will Tennis Elbow go away?

Typically, yes, but in some people, the problem becomes chronic. This is called "tendinosis" to distinguish it from "tendinitis" which is more of an acute problem. Many people choose to live with this condition, using ice or taking anti-inflammatory medications on an intermittent basis as needed. Others choose to have surgery to remove the "scar" tissue that has developed.

#### **How can Tennis Elbow be prevented?**

When lateral epicondylitis develops in tennis players, it is usually due to poor technique or improper equipment. Equipment modification (lower string tension, increase grip size, reduce the size of the racket head, etc.) can help as can attention to proper racket swing technique. Since tennis elbow may occur in the occupational setting also, attention to ergonomics and proper technique, particularly in those who perform repetitive activities is important. It is important also to keep the forearm muscles strong and supple. If you think that you may have overtaxed your forearm muscles, or at the first sign of discomfort in the elbow region, application of ice can help to nip things in the bud.

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