GUIDE TO ELBOW INJURIES

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Introduction

Elbow injuries are common and can be debilitating. The aim of this e-book is to provide an overview of elbow pain, as well as what to expect from a treatment provider. It is not a diagnose yourself or treat yourself guide. There are several potential sources of elbow pain, most of which are not medically serious. However pain is often a warning sign and sometimes serious pathology can cause elbow pain. **If you have a problem you need to be professionally assessed.**

We hope that by understanding your condition better it will aid your recovery. It is beyond the scope of this document to cover every type of elbow problem, but we will cover in some detail the most common ones. These are:

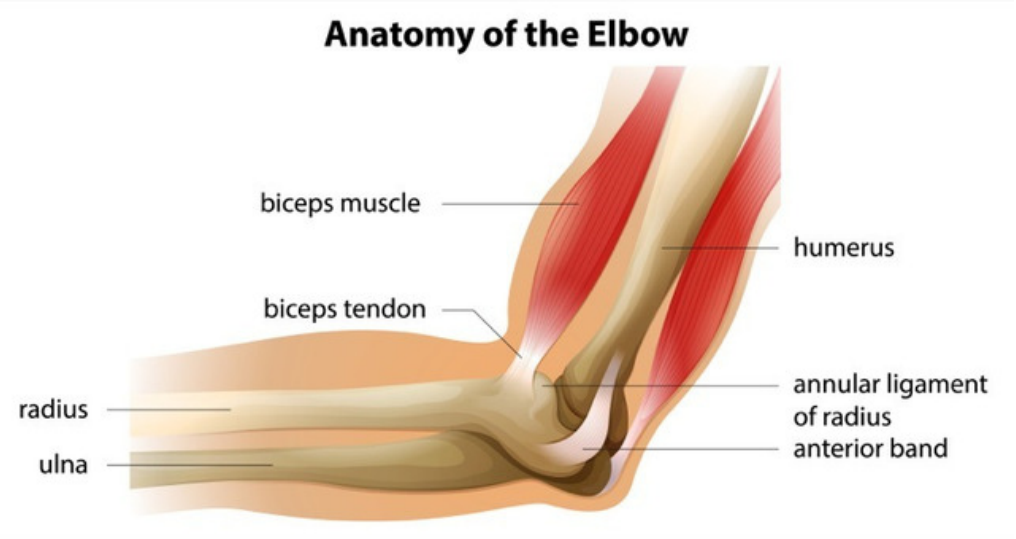
- Tennis elbow
- Golfers elbow
- The Stiff elbow

Basic anatomy

The elbow joint occurs at the junction of the humerus (upper arm bone), the ulna (inside forearm bone) and radius (outside forearm bone).

Like all synovial joints in the body, the elbow joint has a capsule enclosing the joint which is a fluid filled sac lubricating the joint. The joint capsule is thickened on the inside and outside to form ligaments, which prevent excessive side to side motions of the elbow.

There are numerous muscles crossing the elbow. These include the biceps, triceps and wrist flexors and extensors.



What to do if you have elbow pain?

01 **Let a professional assess you.** Elbow pain can come from places other than the elbow, for example from the neck. Only a health professional can assess this.

02 **Manage your pain.** This can include medication, support strapping or bracing or some exercises and hands-on treatments. It should also include sensible activity modification.

03 **Don't stress about it.** Psychological stress can actually increase pain. Elbow pain will settle with appropriate treatments and care.

What to expect from your treatment provider

01 An explanation of your problem

02 Alternative explanations if the actual diagnosis is not clear

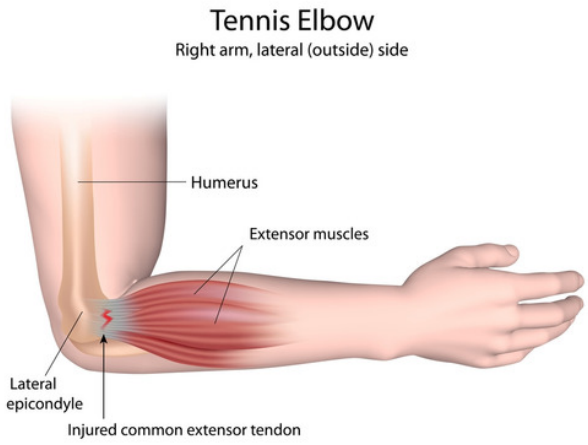
03 Advice on what to do and what to avoid

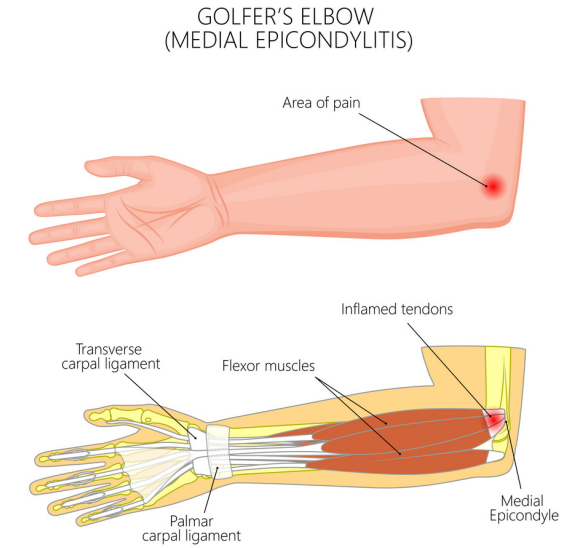
04 An estimate of how long treatment will take and how much this will cost

05 A discussion of your goals for this problem and whether they are realistic

06 A discussion with other treatment providers, who can assist in your management.

Common conditions





"Tennis elbow" and "Golfer's elbow"

Tennis elbow or lateral epicondylagia is the most common cause of pain on the outside of the elbow. This injury causes significant pain with gripping, with even simple tasks such as lifting a coffee cup sometimes painful. It is estimated approximately 40% of people will suffer from this at some point in their life. It is caused by trauma or degenerative change of the **common extensor origin tendon.**

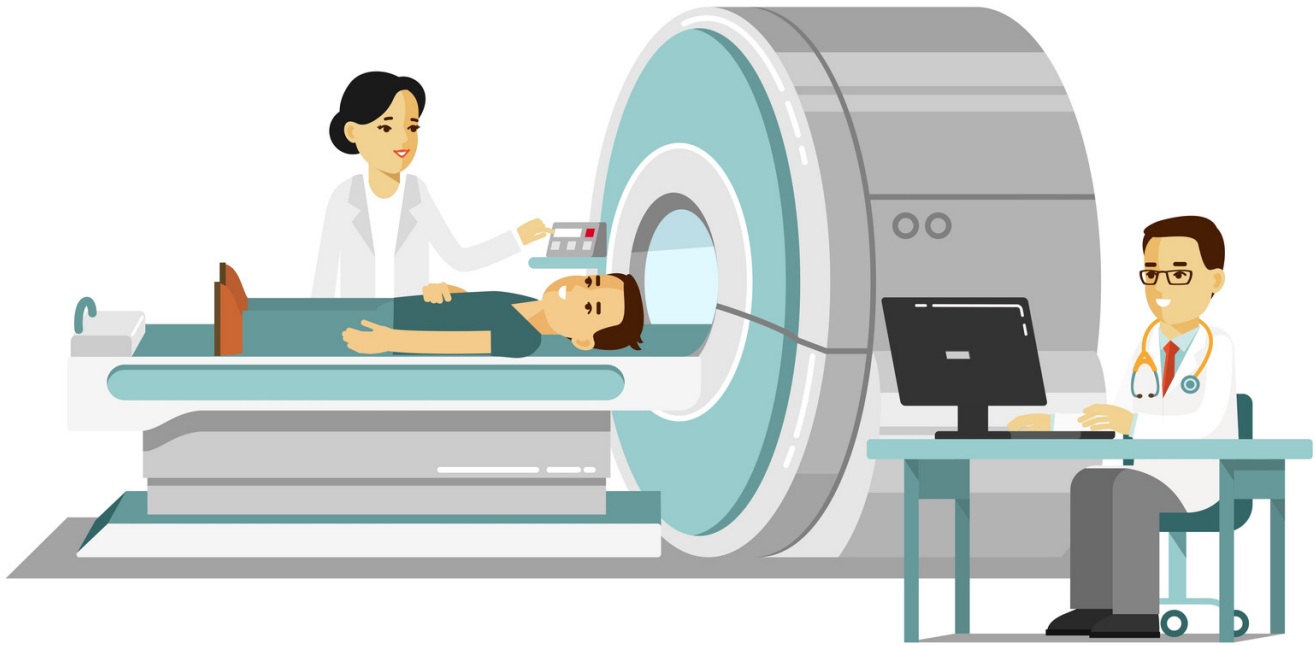
Golfer's Elbow occurs to a tendon on the inside of the elbow.

The names "tennis elbow and golfer elbow" are not very accurate as they both occur frequently from activities other than tennis or golf.

Diagnosis

Tennis and golfer's elbow are clinical diagnoses determined after discussing your symptoms and examining you.

Imaging, such as MRI, x-ray or ultrasound is typically only required if another potential cause of the elbow pain is suspected.



Management of tennis and golfer's elbow

Conservative management (i.e. Physiotherapy) is recommended as the first line of treatment of tennis and golfer's elbow. Treatment options include.

- **Activity modification** - load management is a key element to recovery. When the tendon is irritated it is best to avoid or modify aggravating activities to allow the pain symptoms to settle before gradually increasing load. In particular you should avoid heavy gripping and lifting with the knuckles up.
- **Exercise** - Strengthening exercises have been found to provide the greatest effects of pain relief and functional improvement. It is important the exercises are graded and appropriately progressed.
- **Manual therapy** - mobilisation techniques and soft tissue massage applied to the elbow, wrist, cervical and thoracic spine may reduce pain and increase pain free grip strength.
- **Braces and taping** - Elbow braces such as counterforce brace may be able to provide pain relief and improved function in the short term, to assist you in maintaining function.
- Multimodal program - A multi-modal program consisting of manual therapy and exercise in the research has been shown to be more effective than injections in the short and long term for improving function and providing pain relief.

Timeline for recovery

The recovery timeframes for tennis and golfer's elbow can be anywhere from 6 months to 2 years or longer. A study found that over 50% of patients attending there general practitioner for their lateral elbow pain reported not being fully recovered at 12 months post onset of pain. Tennis elbow is not a self-limiting condition that will settle on its own without appropriate rehabilitation and is associated with ongoing pain and disability. So getting expert assessment and treatment is essential for recovery.

Tennis and golfers elbow are both tendon disorders, also known as tendinopathies. Here is a list of 10 tips from Physiotherapist and tendon researcher Jill Cook, which describes:

9 things not to do if you have tendon pain

01 **Rest completely.** Resting reduces the ability of the tendon to take load. Reduce your loads to the level that the tendon can tolerate then slowly increase them.

02 **Have passive treatments.** Treatments which do not address the ability of the tendon to take load are not helpful in the long run.

03 **Have injection therapies.** Injections of substance into the tendon have not been shown to be effective in good clinical trials. Do not use them unless a tendon has not responded to an exercise based program.

04 **Ignore your pain.** Not all pain is necessarily bad but it is a warning. Pain that persists for a day or 2 following exercise or changes the way you move is probably doing you harm.

05 **Stretch the tendon.** This causes compressive loads in many tendon problems which is not beneficial.

06 **Massage your tendon.** This just adds more load and has potential to irritate it further.

07 **Worry about MRI or ultrasound findings.** These often don't correlate well with symptoms and disability, and do no predict whether you will recover.

08 **Take short cuts with your rehabilitation.** The tendon needs time (many months) to recover. There are no proven short term solutions.

09 **Misunderstand loads.** The highest loads are in running and sports. Lifting weights is not considered high tendon load and can be beneficial to recovery.

The stiff elbow

There are a numerous ways that an elbow can become stiff. The common ones are osteoarthritis, and arthrofibrosis.

With **osteoarthritis**, extra bone is produced and the smooth cartilage surface of the joint is eroded. These changes can result in elbow stiffness.

Arthrofibrosis refers to fibrous tissue developing in or around a joint. It is commonly caused by immobilisation, and is common after elbow fracture.

Physiotherapy can assist a stiff elbow by providing exercises and via hands on mobilisations.

Remember, always seek professional advice. Your Physiotherapist is the best person to guide your treatment. We hope this guide is helpful. Please feel free to share it with anyone you think would benefit from it.



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