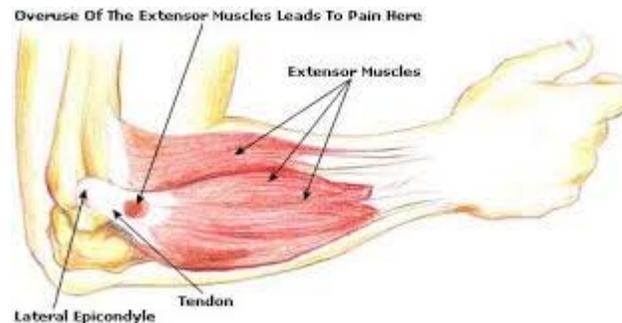


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Lateral Epicondylitis

Lateral epicondylitis, or tennis elbow, describes a condition of injury or degeneration on the outer aspect of the elbow, where a tendon (the common extensor tendon) attaches to the bone. It is also known as epicondylitis, although inflammation is less commonly present. The condition is similar to other degenerative tendon conditions, such as rotator cuff syndrome and Achilles tendinosis



Symptoms:

The primary symptom is pain along the outer aspect of the elbow, sometimes dull and achy and sometimes sharp and burning. Pain may be made worse with gripping and grasping. There is seldom any outward sign of a problem, such as swelling. Patients may lose grip strength, and may lose range of motion at the elbow. Oftentimes the loss of mobility is actually due to pain rather than true stiffness.

Cause:

As we get older, degeneration can affect multiple areas in the body. One area that is prone is where tendons attach to bone. Degeneration is the leading cause of lateral epicondylitis. Injuries, whether an acute strain, or from chronic overuse, can also be associated with development of lateral epicondylitis. A



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severe injury, or chronic tendinosis, can cause partial or complete tears, where the tendon can detach from the bone.

Diagnosis:

A careful history and physical examination will diagnose most cases of lateral epicondylitis. X-rays may be obtained to evaluate for other causes of elbow pain, and to evaluate for bony abnormalities. Diagnostic ultrasound can be used to visualize tears and tendinosis. Occasionally, an MRI may be required.

Treatment:

Most patients with lateral epicondylitis are treated nonsurgically. Injections and surgery are also options.

Nonsurgical Treatment

--Modalities such as anti-inflammatories, ice, heat, and bracing can be helpful.

--Physical therapy is the mainstay of treatment, and can not only help to restore range of motion and strength to the elbow, but it may also encourage healing of the degenerated tendon to bone.

--PRP injection. PRP uses the body's own healing factors to help heal tendonitis and partial tears. PRP is one of the most effective ways to treat lateral epicondylitis. It may speed time to healing, and reduce the duration of symptoms. Other *biologicals*, such as AmnioFix, may have a similar stimulation of the body's own healing response.

--Steroid injections. Cortisone is a powerful anti-inflammatory medicine that is injected around the tendon origin. It can help to reduce pain, but there is concern that it may interfere with healing of the tendon to bone.

Surgery:

The vast majority of patients with lateral epicondylitis are treated nonsurgically. When surgery is necessary, it can be done arthroscopically, or with a small incision over the outer aspect of the elbow. Surgery is typically recommended only after 6-12 months of conservative treatment.