

Golfers/ Tennis elbow information sheet

What is it?

Golfers elbow causes pain on the inside of the elbow; tennis elbow causes pain on the outside of the elbow.

What causes it?

Contrary to public belief these 2 conditions are rarely caused by golf or tennis. The pain is caused by repetitive damage and inflammation of the muscles that flex and extend the wrist where they insert into the bones of the elbow joint.

It commonly affects patients in their middle age and is uncommon in the elderly. It may be precipitated by repetitive, strenuous overuse or trauma.

What are the symptoms?

Patients complain pain and discomfort around the boney areas of the inside and outside of the elbow. This may be accompanied by swelling and stiffness of the joint. The pain is exacerbated when flexing or extending the wrist or by everyday activity.

Do I need any further investigations?

Generally patients require an x-ray to exclude any degenerative change in the elbow. Some patients may require an MRI scan to exclude injury to the ligaments of the elbow, which may mimic the symptom of tennis elbow.

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What is the treatment?

The natural history of this disorder is that it will resolve with time, however many patients are unhappy to live with the discomfort and request treatment.

Simple splinting and physiotherapy may relieve the discomfort in early and mild cases. More resistant cases can respond to a steroid injection, although this should only be carried out once. Use of biological injections such as PRP (Platelet rich plasma) are useful in resistant cases and involve using injecting the patients with various healing components that are removed from their own blood.

Around 15% of patients will not respond to the above treatments and may require surgery. This involves a small incision over the affected area and the surgical release of the muscle insertions from the bone. This procedure is carried out under general anaesthetic as a day case procedure.

How long will it take to recover?

Following the surgery a bulky bandage will be applied to elbow. You will be reviewed by a physiotherapist at 7-10 days who will inspect the wound and get your elbow moving. It may take up to 3 months to feel the full benefit from the surgery. Around 80% of patients will see an improvement but this may not be complete resolution of the symptoms.

What are the potential complications?

- Infection Uncommon and usually treated very successfully with antibiotics.
- **Delayed healing-** Smokers and those with diabetes are more prone to this.
- **Painful/ Tender Scars-** the vast majority of patients complain of some discomfort around the scar and thumb, this is know as pillar pain and generally resolves with time. Rigorous wound care and desensitization as directed by your hand therapist help prevent this.
- **Damage to surrounding structures-** inadvertent damage or stretching to surrounding nerves may cause some numbness around the scars, although this should improve with time.
- **Stiffness** Operations to the hand cause stiffness; this can be minimized by working closely with your hand therapist.
- CRPS- An uncommon but potentially serious complication of hand surgery leading to pain, stiffness, swelling and discomfort. It is impossible to predict this problem but working closely with you hand therapist and getting your hand moving early has been proven to significantly reduce the risk of this.

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When can I get back to normal activities?

The elbow MUST be kept clean and dry for 10 days until the sutures are trimmed you should be able to return to "desk job" type activities within a few days of the operation. Any manual work, heavy lifting or sporting activities should be avoided for at least 4-6 weeks. You may return to driving in a few days.

Please inform your insurance company that you have recent hand surgery to ensure that are happy for you to do so.

