

Information about **Tennis Elbow (Lateral Epicondylitis)**

This leaflet will give you some information about tennis elbow (which is also known as Lateral Epicondylitis) and how we treat it.

Key points

- Tennis elbow is not a serious condition - it gets better with time and no-one ever has it forever.
- It is completely safe to continue using your arm within the limits of discomfort.
- 8 out of 10 people who suffer from it are better within 1 year.
- You can control the pain by
 - Changing the way in which you carry out activities
 - Doing specific exercises
 - We only use injections for longstanding, problematic cases.
 - We only consider surgery as a last resort in a very small number of cases.



What is tennis elbow?

It is a condition which affects the tendons that attach the muscles of the wrist and fingers to the bone on the outside of the elbow. This area becomes painful and you may also feel discomfort in the forearm. Less frequently, a similar pain can be felt on the inside of the elbow and is known as a 'golfer's elbow'.

How common is it?

It usually affects people over the age of 40, and is more common in women than men.

What are the symptoms?

- Varying degrees of pain on the outside of the elbow, ranging from mild discomfort to severe pain interfering with your sleep.
- Repeated movements with activities such as housework and DIY will increase the pain, especially gripping or twisting movements and lifting and pouring from a full kettle with a straight elbow.
- The outside of your elbow may be very tender to touch.

Why does it occur?

We do not know the exact cause of tennis elbow. Most people do not play tennis! It is thought to be an overuse problem, usually occurring with repetitive wrist and hand movements in work and leisure activities.

What can I do to help ease the pain?

Tennis elbow is often regarded to be a trivial problem but can be very painful and make life quite difficult. The most important thing to remember is that it will get better on its own eventually. How long this takes varies and can range from a few weeks to several years. However 8 out of 10 people have largely improved within 1 year. The trick is to find ways of keeping the symptoms under control until it gets better. There are lots of things you can do.

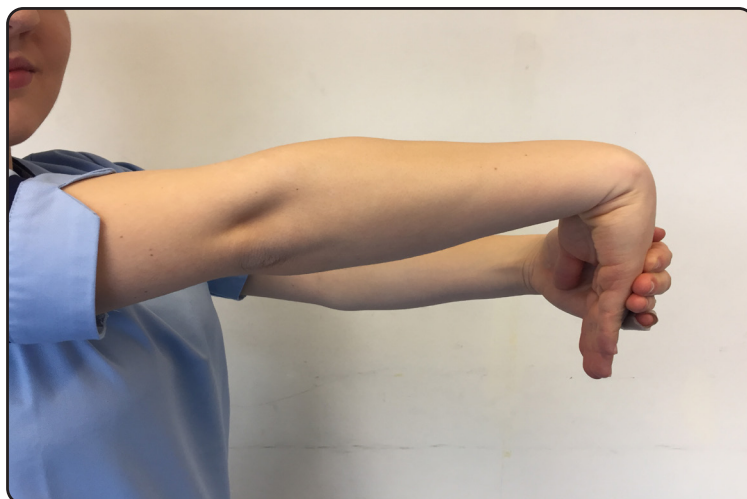
What can you do to control the symptoms?

- Rest your elbow by trying to avoid the activities that make the pain worse.
- Be aware of the amount of force that you use to grip things. Try and use the minimum amount of force to maintain contact.
- Where possible avoid lifting anything with the back of your hand showing; try to pick up 'palm up'.
- Changing the grip size on objects you use may also help. Often enlarging the grip and reducing the weight of rackets or tools etc. is useful.
- Ice cube massage: apply oil to the tender area first to protect the skin and then massage with a wet ice cube wrapped in a damp cloth for up to 10 minutes.
- If your job involves repetitive manual handling activities or repetitive movements such as keyboard or mouse work, have a close look at your work activities and workstation (i.e. your desk).

Exercises

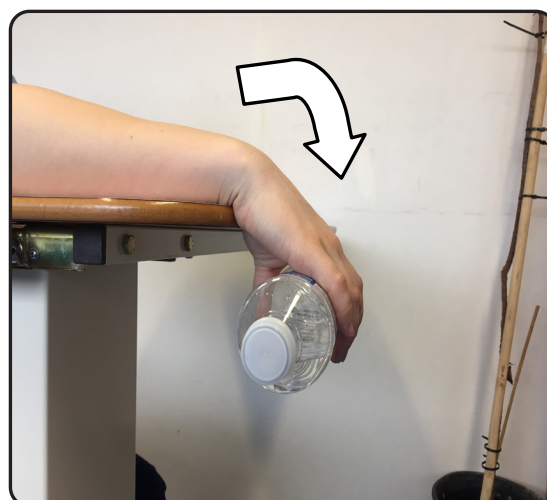
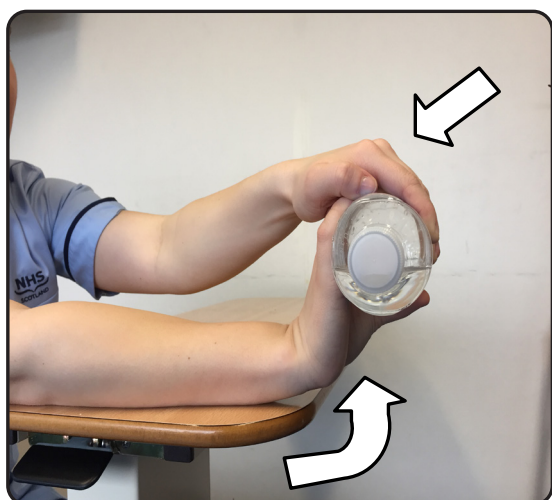
Stretching

Standing or sitting. Place your arm out in front of you with your elbow straight and palm facing downwards. Bend your wrist so that your fingers are pointing to the floor. Gently press the back of your hand with your other hand. Hold this stretch for a count of 20 seconds. Repeat 3 times, and do this 3 times per day.



Strengthening

Support your forearm on a table with your hand over the edge, palm down. Hold a light weight - this can be a tin can or a small plastic bottle of water. Bend your wrist up assisting the movement with your other hand. Slowly lower your hand down without the assistance from the other hand. Repeat 15 times for 3 sets - once per day.



Painkillers and anti-inflammatory tablets are available from your pharmacist or your GP can prescribe them. You can apply anti-inflammatory cream over the tender area. It is available from the chemist without a prescription, but check with the pharmacist that you have no allergies or conditions that may be affected.

The following may also help:

Physiotherapy

This can include treatments to relieve pain, mobilise surrounding joints and nerves as well as exercise programmes to re-strengthen the muscles. Exercises are an important aspect of treatment and you will be given advice on how to modify the activities that make the pain worse.

Acupuncture

Some people find this really helpful, yet others find it makes no difference at all. You should know within 2 to 3 sessions if it is going to help. Many physiotherapists offer acupuncture as part of their approach to tennis elbow treatment.

Splints

There is no strong evidence to support the use of a splint, but some people find it helpful. There are many types available which aim to decrease the tension on the tendon.

Other advice

An occupational health physiotherapist at your work may be able to advise you further. If you are involved in a sport or hobby using repetitive movements your instructor or coach may be able to offer you advice on techniques.

What are your other treatment options?

Injections

Local anaesthetic and steroid (cortisone) used to be routinely used as it often helped for a number of weeks. However an injection may be painful for a few days afterwards and research now suggests that the pain may return and then be worse than before this treatment. Injections are therefore now only used in people who aren't improving with other methods. The skin at the injection site may occasionally turn pale and thin.

Surgery

This is usually a last resort as initially it does not have a very high success rate and patients are often disappointed.

Further Information

If you wish to speak with an experienced health professional for more information, advice, or an appointment please contact the Helpline on: **0141 201 3114** or **201 3105**.