



ENVISAGE
PHYSIOTHERAPY

Tennis Elbow

What is it and what can I do?



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What is Tennis Elbow

Tennis elbow, also known as lateral epicondylitis, is a condition characterised by pain and tenderness over the bony prominence on the outer part of the elbow. Despite its name, it's not just limited to tennis players and is more commonly found in those who repeatedly use their forearm muscles, especially in activities involving gripping or repetitive wrist movements. These muscles in question primarily operate the wrist moving into extension.

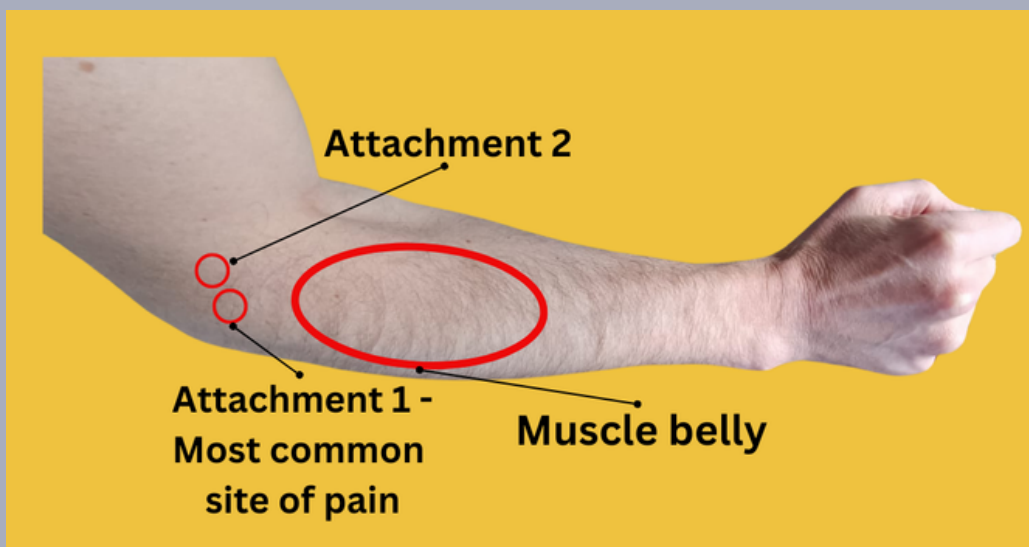


The main cause of tennis elbow is due to overuse or repetitive strain of the forearm muscles and tendons. This can lead to tiny tears within the muscular structure or inflammation within the tendons that attach to the outside of the elbow. This overuse often occurs in activities such as tennis (hence the name), but also in occupations or hobbies that involve repetitive arm and wrist movements into extension, such as painting, typing, plumbing, plastering, carrying and lifting or playing certain musical instruments.



What is Tennis Elbow...cont

As with most tendon related overuse injuries, they are not particularly serious in nature but if not dealt with have the potential to progressively worsen over time to the point so it is always valuable trying to rectify the problem when it starts rather than leaving it. Tennis elbow is known to affect roughly 1-2% of the general population.



Signs & Symptoms

- Pain or tenderness in the bony prominence over the outside of the elbow (Attachment 1&2).
- Tenderness or pain in the muscle belly of the wrist extensors.
- Difficulty completing functional tasks that involves gripping and using the hand on the affected side due to pain.



Predisposal factors

As with lots of other problems there are specific predisposal factors that could lead to you experiencing tennis elbow. Understanding these as part of your history can allow us to offer a clearer diagnosis or differentiate one problem from another.

- **Age:** More commonly affects individuals between the ages of 35 to 54.
- **Physique:** Those who are generally deconditioned but start doing a project/ job involving repetitive use of the hand/ wrist.
- **Job/ Occupation:** Repetitive labour. Those involving lifting, carrying, gripping and movement of the arm.
- **Weakness of Shoulder:** Those who have an underlying weakness of the shoulder on the same side could be at risk.
- **Sporting activity:** Those involving repetitive use of hand and arm such as racquet sports, fencing and throwing sports.

Diagnostic Tests

- **Cozen's** - Resisted wrist extension with elbow extended and forearm pronated
- **Maudsley's** - Resisted extension of the middle finger
- **Mill's** - Passive wrist flexion with elbow extension stretching the extensor tendons

See <https://youtu.be/ueArEYmAxhA> for test demonstration.



Treatment options

The overriding goal would likely be reducing pain to allow you to continue with the job or task you are struggling to complete. It's really important to recognise that well managed treatment is key to a successful efficient outcome.

Management of Activity: Really important to reduce the potential of the condition worsening and to promote early recovery.

Pain Relief: Controlling the pain is imperative to sleep, perform function and enable effective use of the arm and limb.

Steroid Injection: A steroid injection may offer some pain relief if the pain is inflammatory.

Acupuncture: This may be an option to help alleviate some pain if of an inflammatory cause.

Physiotherapy: Physio can help with offering guidance to appropriate management after thorough history taking. Strengthening exercises are also likely to form part of this route.

Tennis Elbow clasp: Using a small tennis elbow clasp can reduce the levels of pain and symptoms but it may well be best using this alongside a strengthening programme.



Prognosis

The literature suggests that Tennis Elbow should improve within a year but this would be dependent on the severity and as previously mentioned how it is managed. I would suggest this could be reduced significantly if accurate diagnosis and appropriate management is adhered to.

Understanding your body and it's tolerances along with being able to make reasonable adjustments to ones' daily living for a period of time can help greatly along with following expert guidance.

Different diagnosis

- **Radial Tunnel Syndrome** - can co-exist with tennis elbow in 5% of cases.
- **Cervical radiculopathy** - usually experience neck pain
- **Elbow arthritis** - symptoms will be deeper inside the elbow joint and age will likely be a factor too.
- **Loose body or trauma** - may experience intermittent locking of the elbow joint when moving.

Any Serious Considerations

There are no specific serious conditions that replicate tennis elbow.



When to seek professional opinion

It is strongly encouraged to seek professional opinion if

- You are worried or experience any '**Red Flag**' symptoms.
- If you suspect a fracture and you need more clarity
- Progressively worsening symptoms
- If you start to experience P&N and/ or numbness in hand/ wrist
- Difficulty in using the hand for functional tasks
- Loss of power to the hand and wrist with no or minimal pain
- You have swelling over the area
- Pain keeps you awake at night
- You have had a fall, direct trauma or injury, just prior to the symptoms
- The symptoms have lasted longer than 4-6 weeks
- Locking or catching feeling when moving the elbow

Need Assistance!!

Contact Envisage Physiotherapy to get a fast and clearer diagnosis or help to manage Tennis Elbow. We are on hand.

Tel: 07980 821762



References



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