



# **Tennis Elbow** Service User Information Leaflet

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Produced by Fife Musculoskeletal Physiotherapy Service

## What is tennis elbow?

Tennis elbow is damage to the tendon at the bony bump on the outer side of your elbow. The tendons link the bone to some of the muscles that move your wrist and fingers. This bony lump is called the lateral epicondyle. The medical name for tennis elbow is 'lateral epicondylosis'.

## What are the symptoms?

Tennis elbow gives pain and tenderness on the outside of your elbow. It may spread down your forearm. Pain normally lasts for 6 to 12 weeks. Tennis elbow is generally a self-limiting condition, and spontaneously improves in about 80–90% of people over 1–2 years. It may, however, last several years in severe cases.

#### What causes tennis elbow?

About 5 in 1000 adults develop tennis elbow each year. Women and men are equally affected, and peak incidence occurs between 35–54 years of age. Repeated use of the muscles that lift your wrist up can cause damage to the tendons. These muscles are also used when you grip and pull. This is why activities such as gardening and painting, as well as racquet sports can cause tennis elbow.

## What can I do to treat tennis elbow?

### Look at what you do

Pace activities. This means stopping activities that bring on your pain *before* your pain starts to increase.

Plan your activities.

Take work breaks, and 'micro-breaks'.

Avoid forced, sustained or repetitive grips.

Lifting: If you have to lift, lift with your palms up, not palms down.

Ensure sports and work equipment are set up and used correctly.

### Stretches

Straighten your elbow and drop your wrist down (see picture.

Gently press on the back of your hand with your other hand. Feel a stretch in your forearm muscles. Hold for 15 seconds and repeat 3 to 5 times, 2 to 3 times per day. These stretches are useful before playing sport with your affected arm.



## Cold therapy

Apply ice packs/frozen peas wrapped in a towel over your elbow for 10 minutes. Periodically check your skin to make sure you don't give yourself and ice burn. Repeat this 3 to 4 times a day

## Medication

Sometimes a short course of pain medication may help. Please see your GP or pharmacist for advice on this.

A forearm or 'epicondylar' clasp may help. These are available from pharmacists or over the internet.

## Are there any other treatments that might be offered?

### Physiotherapy

Treatment may include movement therapy, taping, acupuncture and specific muscle strengthening exercises.

A steroid injection may help ease pain, if the pain is of recent onset and pain is severe. Injections have been shown to have poorer outcomes and lower rates of complete recovery or symptom improvement at one year compared with placebo injection. There is also greater rate of recurrence at one year follow-up.

**Surgery** is rarely used. It is only used in long standing cases with variable outcomes.