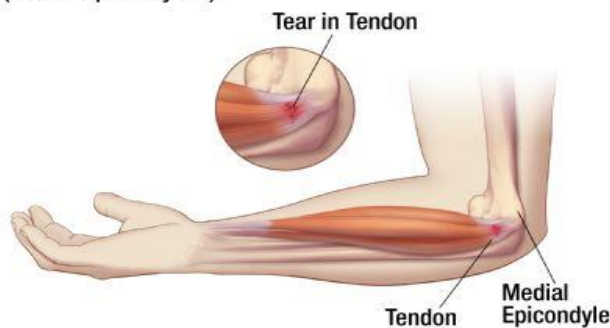


Golfers Elbow

Golfer's Elbow
(Medial Epicondylitis)



WHAT IS THIS? - Golfers elbow or 'medial epicondylopathy' is when the inner part of the elbow becomes painful because of disruption to the tendons that join the muscles of the forearm to the elbow.

WHAT CAUSES TENNIS ELBOW? The most common cause is overuse due to tasks that involve heavy gripping or repetitive movements of the fingers and hand such as typing, racquet sports and manual work.

WHAT ARE THE SYMPTOMS? - The main symptom is pain on the inside of the elbow when gripping or lifting. This progressively worsens with increased use of the arm and may radiate into the forearm. In severe cases sleep, can be interrupted and you may also get pain or stiffness in the whole arm, shoulder and neck.

WHAT WILL TREATMENT CONSIST OF?

MASSAGE - encompassing a variety of techniques with sufficient pressure through the superficial tissue to reach the deep lying structures. It is used to increase blood flow, decrease swelling, reduce muscle spasm and promote normal tissue repair.

DEEP FRICTION - an aggressive massage technique applied across the tendon as deeply as possible to break down scar tissue, restore normal movement and prepare the structure for mobilisation or manipulation. This technique is initially painful but then causes a numbing effect.

MOBILISATION - a manual technique where the joint and soft tissues are gently moved by the therapist to restore normal range, lubricate joint surfaces and relieve pain.

ULTRASONIC THERAPY - transmits sound waves through the tissues stimulating the body's chemical reactions and therefore healing process, just as shaking a test tube in the laboratory speeds up a chemical reaction. It reduces tissue spasm, accelerates healing and results in pain relief.

INTERFERENTIAL THERAPY - introduces a small electrical current into the tissues and can be used at varying frequencies for differing treatment effects. E.g. pain relief, muscle or nerve stimulation, promoting blood flow and reducing inflammation.

OTHER TREATMENTS THAT COULD BE USED - Acupuncture - an oriental technique of introducing needles into the skin to increase or decrease energy flow to promote pain relief and healing.

INJECTION THERAPY - a specialist procedure which needs the consent of your G.P. A non-harmful steroid and local anaesthetic are injected directly into the injured structure. It has a dramatic effect on removing inflammation and promoting healing.

TAPING/STRAPPING - may be used if thought necessary to restrict abnormal movement and prevent further damage.

WHAT CAN YOU DO TO HELP YOUR CONDITION?

REST - as much as possible avoid using the affected arm, if having to lift or grip ensure the palm is facing downward with the arm close to the body.

APPLY AN ICE CUBE - in the first few days or if acutely painful gently rub an ice cube over the area for about 5 mins particularly after doing your exercises or using the affected arm.

EXERCISE PROGRAMME - This is the most important part of the rehabilitation, your therapist will instruct you as to which exercises to begin with, when to add the others, as well as how to progress the exercises.

EQUIPMENT MODIFICATION - Regular racquet players may need to adjust their grip size, string tension, head size or racquet material.

ERGONOMICS - ensure your workstation is encouraging you to attain good posture and keep the arm close to the body

WEAR AN ARM BRACE - if severe a strapping made of silicone or plastic can be worn to decrease strain on the tendon.

MEDICATION - Ask your GP or Pharmacist for advice on the best medication for your condition.

HEAT PACKS - A hot pack may be beneficial in helping the muscles to relax, promote blood flow to the area and provide pain relief

WHAT IF PHYSIOTHERAPY DOES NOT HELP OR RESOLVE MY CONDITION? - It is very rare that physiotherapy does not give great benefit, in these cases a cortisone injection may be appropriate and can be discussed with your therapist if appropriate.