

**Lateral Epicondylitis** – inflammation of the lateral part of the elbow where the tendons attach to the bone.

**Synonyms:** Tennis elbow

**Symptoms:** sharp/stabbing pain over the lateral part of the elbow, tender to touch, increasing discomfort with activity (shaking hands, lifting items with a pronated (palms down) grip). Later the pain can become dull/achy, even at rest.

**How is it diagnosed?**

A thorough patient history and examination can lead towards the diagnosis of lateral epicondylitis. X-rays are often negative, but can help rule out fractures and calcific tendonopathies. Characteristic changes in the tendons can be observed with advanced imaging techniques such as MRI, but don't tend to correlate well with symptoms. Advanced imaging is typically not pursued until after 6-8 weeks of conservative care has been completed.

**How is it treated?**

- True lateral epicondylitis (inflammation present) can be treated with rest, ice, muscle stimulation, cold laser therapy, and manipulation/mobilization of the elbow.
- Most people present with tendonopathy, in which the tendons begin to degenerate after failing to heal properly. Treatments may include manipulation/mobilization of the elbow, ice, bracing/orthotics, cross friction massage, continuous ultrasound, cold laser therapy, and exercise (eccentric type).

**Alternative treatments.**

Oral anti-inflammatory medications, \*Therapeutic injections, \*\*Surgery.

\*Therapeutic injections are used for pain control but are often associated with poorer long-term outcomes (slows healing).

\*\*Surgery may be considered after 3-6 months of conservative care has been performed.

**Prognosis** is fair. The prognosis for lateral epicondylitis is not well defined in the research. Approximately 80% of individuals will be symptom free within 8-12 months.

**Duration of care:** *Approximately* 10 to 14 visits spread out over 8 to 12 weeks.