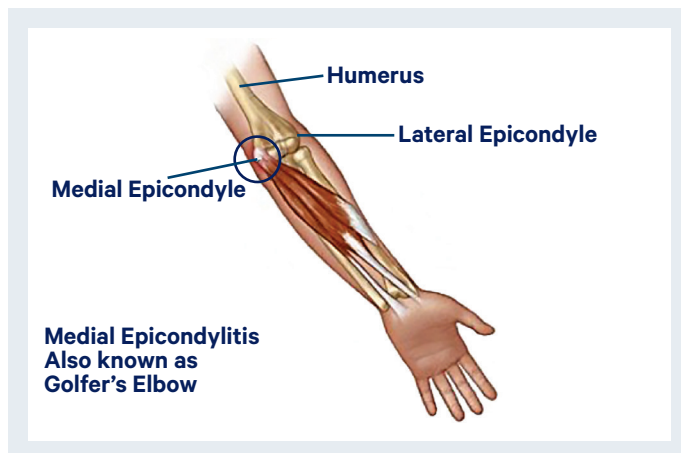


Golfer's Elbow

WHAT IS A GOLFER'S ELBOW AND HOW DOES IT HAPPEN?

Golfer's elbow (or medial epicondylalgia) is pain on the inside of your elbow where the muscles that bend your wrist and fingers attach to the bone. The pain can appear suddenly or gradually over time. More often it happens with repetitive or heavy stress to the elbow over weeks or months or with improper lifting, throwing or hitting in activities such as golf.



When you have the injury there may be swelling around the tendon causing pain over the elbow and pain with certain movements, especially gripping. Your elbow might feel stiff and you may feel weak when gripping. Over time, with repetitive use and as we get older the tendon can degenerate. Small tears called micro tears followed by scarring can happen in the tendons leading to golfers elbow.

HOW IS A GOLFER'S ELBOW TREATED?

Hand Therapy

Your hand therapist will ask you questions about your elbow, what activities affect the pain and will also discuss your work, sport and hobbies. They will look at your elbow and wrist movements and measure how strong your grip is. From this assessment your therapist will be able to tell you if you have golfer's elbow and discuss how best to manage it.

You may need to get x-rays of the elbow to rule out other problems with the elbow joint, although usually with golfer's elbow the x-rays are normal. Occasionally an ultrasound scan may be done to see what is happening where the tendon attaches to the bone.

Your hand therapy treatment may include

- Resting the tendon and muscles by using tape or a tennis elbow strap, or wrist brace.
- Ice to the painful area and anti-inflammatory medications may help to settle swelling.
- Heat and massage to the forearm muscles to reduce muscle tension and pain.
- Exercises to gradually stretch and strengthen the forearm muscles and wrist.

- When symptoms are from a certain sport or work activity your therapist can suggest ways to change how you use the arm in these to reduce the pain and help stop a flare up of your symptoms.



Surgery

If there is no improvement in your symptoms, your hand therapist may refer you to a specialist for platelet rich plasma (PRP) injection or a cortisone injection.

If symptoms don't settle, surgery may be an option, although this is not often needed.

WHAT CAN I EXPECT FROM MY REHABILITATION?

Your acute symptoms should settle over 6-8 weeks in a new injury or in milder cases. If you have had your symptoms a long time or with degenerative changes in the tendon it can take 6-9 months or longer for things to fully resolve. During this time you should be able to continue normal activity with the use of supports, activity modification, and strategies to reduce pain and muscle tension.

If your symptoms do not settle down your hand therapist can refer you to a hand surgeon who can talk to you more about other treatment options.

Do

- Remember to wear your splint.
- Avoid the activities that bring on your symptoms.
- Rest your arm between activities, especially if you are doing anything heavy or repetitive.

Do Not

- Do lots of forceful gripping at one time.



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WHAT SHOULD I LOOK OUT FOR?

- Look out for activity that causes pain, swelling or numbness in your hand and arm, try to avoid it, and tell your hand therapist.
- If your splint is uncomfortable or rubbing book an appointment to see your hand therapist.
- If things are getting worse book an appointment to see your hand therapist.

WHAT WILL HAPPEN IF I DO NOT HAVE TREATMENT?

In most cases pain and swelling will get worse with time and become much harder to treat. This will affect you in everyday tasks. Treatment is more effective if started within the first few months of symptoms.

CONTACT DETAILS AND REFERENCES

Your hand therapist is

Merivale Hand Clinic (03) 3559775

Rehabilitation of the Hand and Upper Extremity, Sixth Edition. Ed Skirven, Osterman, Fedorczyk, Amadio. P 1113

<http://www.houstonmethodist.org/orthopedics/where-does-it-hurt/golfers-elbow>