

ARTICLE: Epicondylitis Of The Elbow—A Difficult Proposition

This week we are going to leave the spectrum of movement disorders to discuss a condition which occurs in weekend warriors, gardeners, athletes, and all of those that use the wrist and hands excessively. Recently it has become epidemic in our clinic. Patients appearing at the door with either lateral epicondylitis (tennis elbow) or medial epicondylitis (golfer's elbow). This seems to be a seasonal issue as spring and summer bring out the epicondylitis in all of us.

Epicondylitis is the inflammation of the tendon insertion of either the common extensor tendon the outside of the elbow (tennis elbow) or the medial elbow flexors on the medial aspect of the elbow (golfer's elbow). Depending on the type of movement which incited the inflammation the failure of the tissue occurs resulting in inflammation and a cycle of healing and tearing which can become chronic if not properly treated.

Many patients come to the clinic stating that their elbow pain is chronic and that it has been there for several months if not a year or more and as such, the chronicity of this condition is of significant concern. It does make more sense when one knows that the tissues of the elbow which should be trying to heal (fibroblasts) have been documented to actually go into dormancy after a significant period of inflammation and nonhealing. During this dormancy the inflammation remains but the healing does not occur and therefore the condition appears to be chronic. If the fibroblasts were healing normally, the tissues would form normal cross links and structurally realign to the point that they could attenuate or take force. However, when the fibroblasts go into dormancy, they do not attenuate force well, tear easily and contribute to a chronic reinjury of the area.

So you ask, how does one get the tendon fibers of the elbow to start healing again? The answer is not as simple as that. However, I will give some antidotal evidence to explain some treatment options. Some treatments which have shown usefulness include stretching (specific stretches given by the physical therapist to encourage elongation of the tendon fibers), cross friction massage (a technique in which the patient applies perpendicular forces to the injured tendon) in order to encourage realignment of the fibroblasts and stimulate healing at the injured area. Iontophoresis, a technique of needle free steroid injection in which electricity is used to push a steroid solution into the area, steroid injection--an application of steroids to the specific area decreasing inflammation (I should note that though steroids and non-needle iontophoresis both make the elbow feel better decreasing the inflammation actually decreases the healing and therefore the tendon is likely to recurrently become inflamed. The same is true for nonsteroidal anti-inflammatory drugs which quell the inflammatory process decreasing inflammation and subsequently decreasing the healing process. Studies show up to 40% less strength in tendons subjected to anti-inflammatory treatments than those that are allowed to be normally inflamed.

One of the most effective techniques I have found for medial or lateral epicondylitis is trigger point dry needling. Though the exact mechanism is not known, the tendon is fenestrated or poked full of holes using an acupuncture needle resulting in a healing response which seems to at least antidotally work much better than traditional physical therapy intervention. One theory is that by causing bleeding at the site of the inflammation that the growth factors in the platelets are activated and assist in the healing process of the otherwise dormant fibroblast cells.

Another possibility is that the needling increases the inflammatory response thereby activating the healing process. Whichever turns out to be true, this technique is extremely effective in resolving cases of tennis elbow and golfer's elbow. I have personally found that between 3 and 5 sessions of treatment is all that is necessary to resolve what would otherwise be a chronic condition.

As you can see tennis elbow and golfer's elbow are extremely problematic conditions for those who suffer from them and when proper treatment techniques are applied including rest, ice, compression and in some cases, anti-inflammatory treatment and or trigger point dry needling these conditions can be successfully treated.

For more information on the treatment of epicondylitis, do not hesitate to contact the clinic for more information.