

Elbow Disorders

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Work Related Injuries Workshop
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Elbow Disorders

- Lateral epicondylitis
- Medial epicondylitis
- Olecranon bursitis



Tennis Elbow (*Epicondylitis*)

Common condition

- Insertional Tendinopathy
 - Microtears in tendon
- Pain at lateral elbow
 - Increases with resisted wrist extension





"It's not Tennis Elbow. This is from under use...Elbow Macaroni Syndrome."

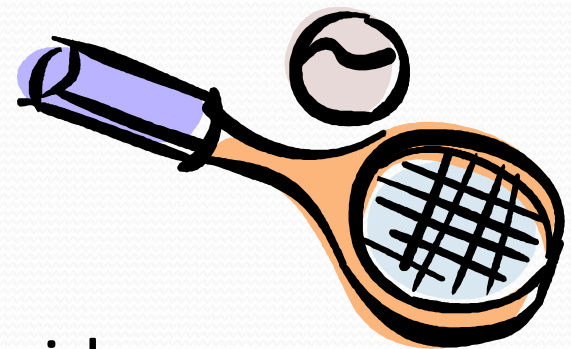
Tennis Elbow Non-op Treatment

- Educate
- NSAID
- Avoid Provocative activities- Palm up
- Relative rest
 - Counterforce strap
 - Wrist splint
- Stretching
- Eccentric strengthening
- ?? Steroid injections
- ?? PRP etc.



Tennis Elbow Treatment

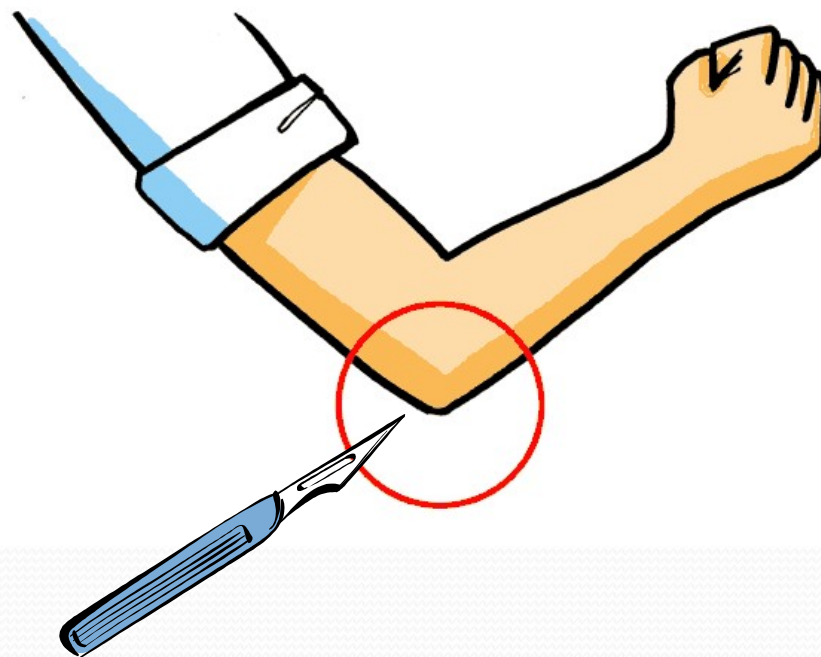
- Surgery:
 - 6-12 months symptoms
 - Failed nonoperative management
- Preop MRI in work related
- Surgery
 - Percutaneous release- (HLK)
 - No debridement
 - Elbow arthroscopy- debride
 - Open procedure (standard) Debride



Tennis Elbow Surgery

Percutaneous Release

- Minimal incision
- Faster rehabilitation
- Minimal scar
- Potential cost savings
- Disadvantages
 - Don't see joint
 - Don't debride





Tennis Elbow Post-op

- Recovery varies
- Light activities 5-10 days
- Stretch helps
- Lift palm up
- Usually PT
- In WR may take 6 months to heavy
- Continued symptoms

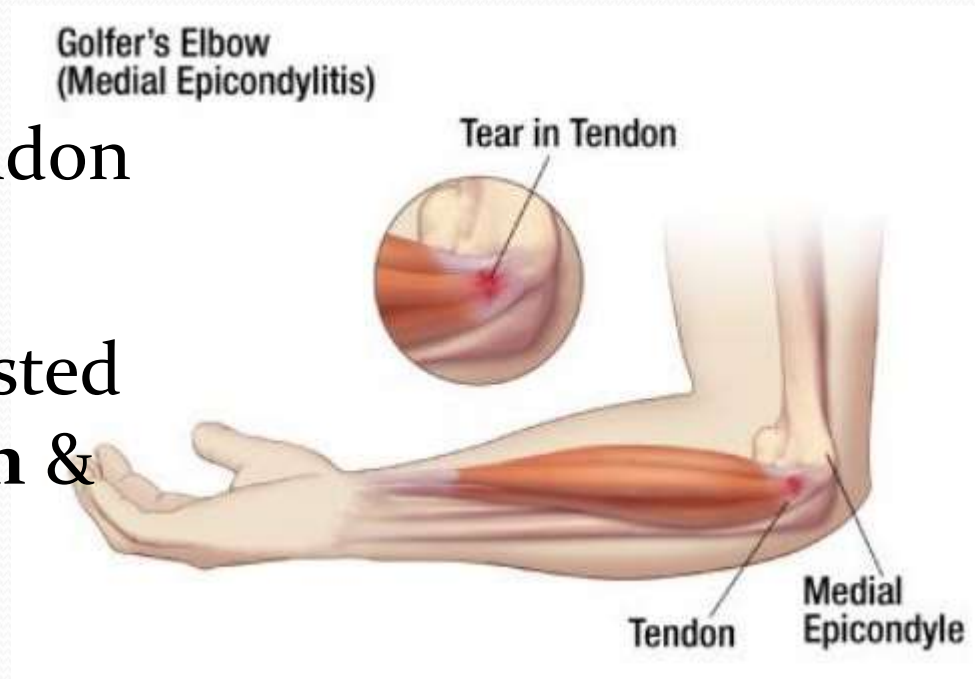


Golfers Elbow

(Medial Epicondylitis)

Common condition

- Insertional Tendinopathy
 - Microtears in tendon
- Pain at medial elbow
 - Increases with resisted forearm **pronation** & wrist **flexion**



Medial Epicondylitis

- Medial Epicondyle tenderness



Golfers Elbow Non-op Treatment

- Educate
- NSAID
- Avoid Provocative activities- Palm down
- Relative rest
 - Counterforce strap
 - Wrist splint
- Stretching
- Eccentric strengthening
- ?? Steroid injections
- ?? PRP etc.



Golfers Elbow Treatment

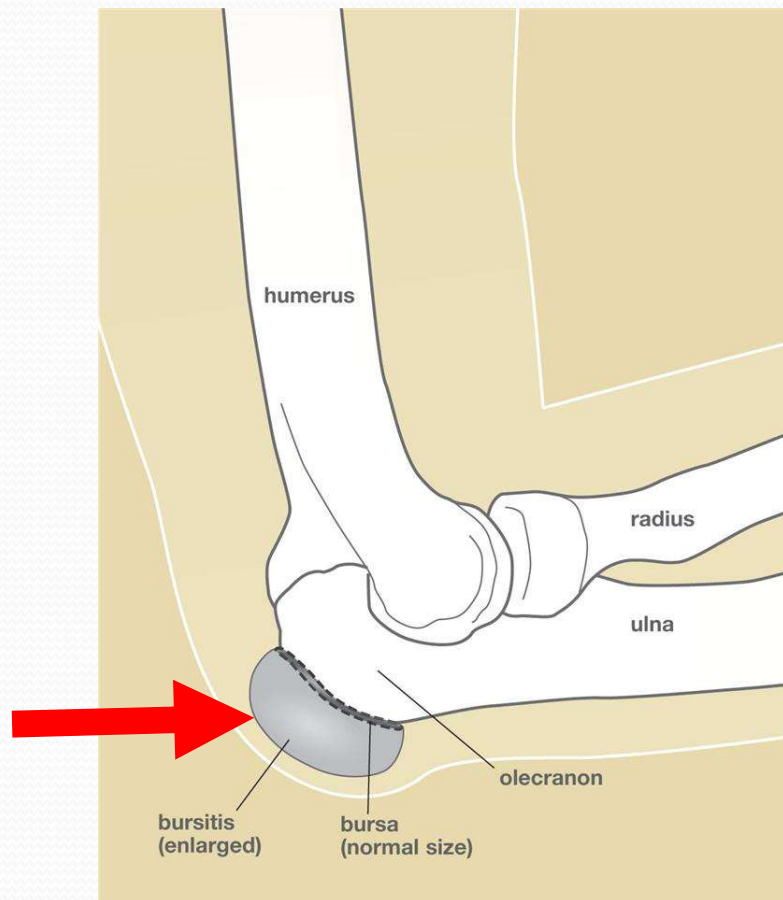
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Golfers Elbow Post-op

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Olecranon Bursitis





Olecranon Bursitis



- Septic vs. non-septic
 - Aspirate
- Non-septic
 - Traumatic
 - Crystalline process- gout (pain)
 - Rheumatologic
 - Swollen
 - Often painless

Olecranon Bursitis



Olecranon spur present 10-30%

Olecranon Bursitis

Non operative Treatment

- Treat cause
 - Crystal disease
 - Rheumatologic- Gout
- Avoid trauma
 - elbow pad
 - Rest
 - splint



Olecranon Bursitis

Aspirate

- Aspiration- diagnosis
- Through normal skin not directly over bursa
- C&S
- Compressive dressing rest 3-10 days
- Splint



Olecranon Bursitis

Aspiration

- ?? cortisone after aspiration
 - must be sure not infected
- Aspiration can be repeated
- Aspiration can be definitive treatment

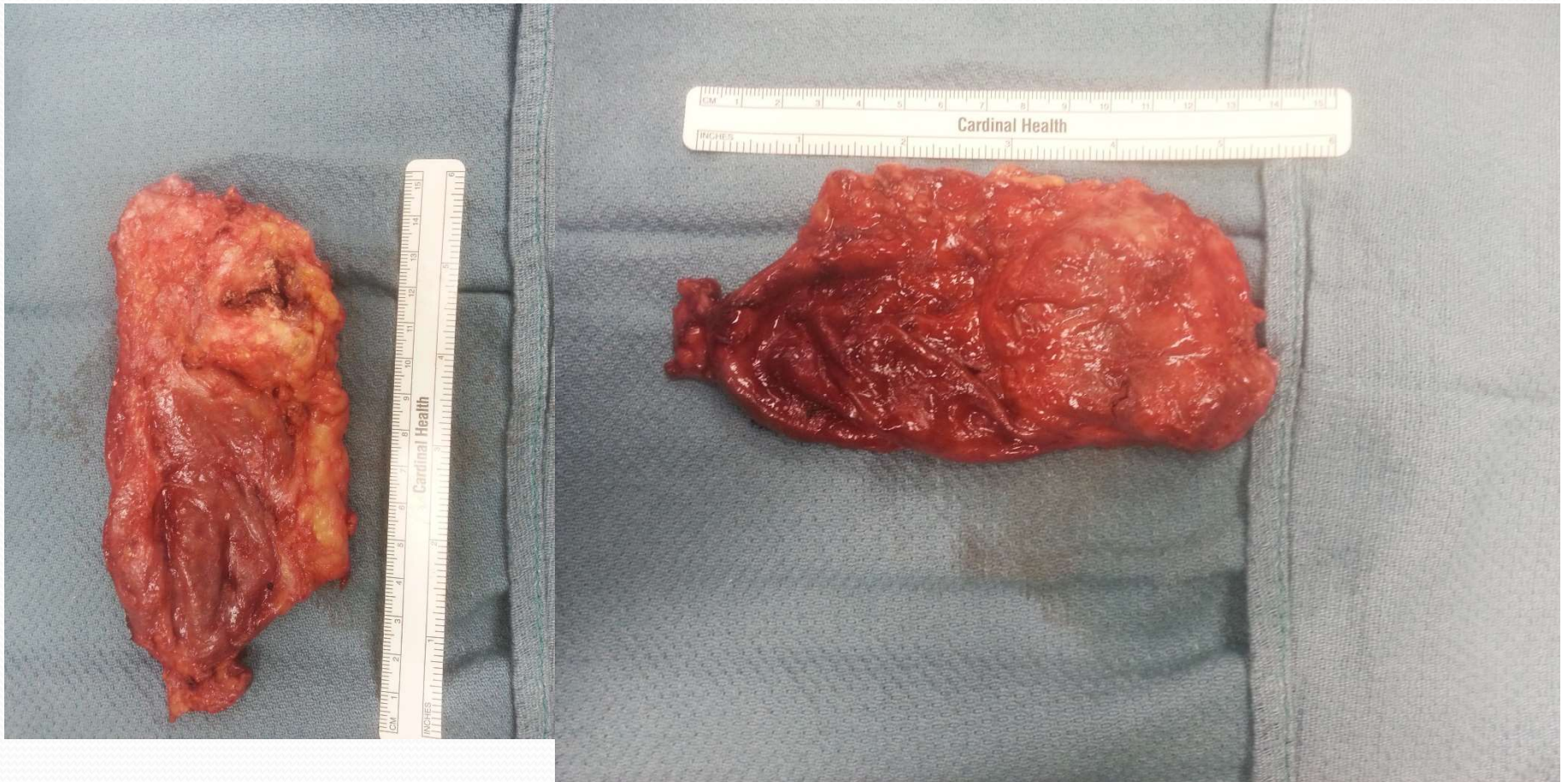
Olecranon Bursitis

Surgical Treatment

- Excise bursa
 - Rarely scope
- Excise spur if present
- Drain
- Immobilize with compression dressing
- Splint 2-3 weeks

Usual Olecranon “Bursitis”



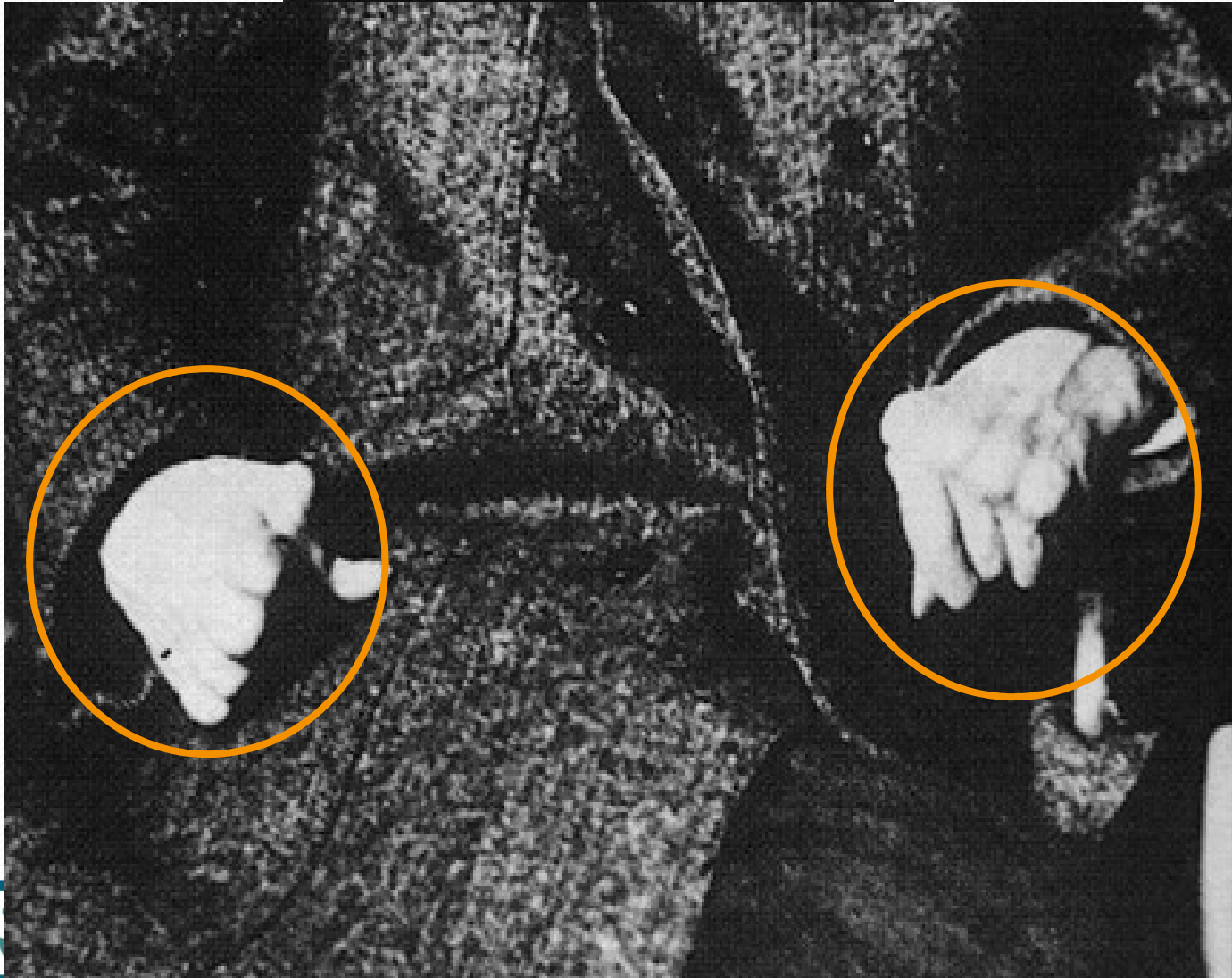


Olecranon Bursitis

Surgical Treatment

- Complications
 - Recur
 - Skin healing difficulty can be a significant problem

PIERRE-AUGUSTE RENOIR



Impairment or Disability



Questions



Thank you!

