

MEDIAL EPICONDYLITIS (GOLFER'S ELBOW)

What is medial epicondylitis (golfer's elbow)?

Medial epicondylitis (golfer's elbow) is a painful inflammation of the bony bump on the inner side of the elbow.

The elbow joint is made up of the bone in the upper arm (humerus) and one of the bones in the lower arm (ulna). The bony bumps at the bottom of the humerus are called the epicondyles. The bump on the side closest to the body is called the medial epicondyle, and the bump on the outer side of the elbow is called the lateral epicondyle.

The tendons of the muscles that work to bend your wrist attach at the medial epicondyle. Medial epicondylitis is also referred to as wrist flexor tendinopathy.

How does it occur?

Golfer's elbow occurs from overuse of the muscles that enable you to bend your fingers and wrist. When these muscles are overused, the tendons are repeatedly tugged at their point of attachment (the medial epicondyle). As a result, the tendons become inflamed (tendinopathy), and repeated, tiny tears in the tendon tissue cause pain. This commonly happens in sports such as golf, in throwing sports, and in racquet sports. It also may happen in work activities like carpentry or typing.

What are the symptoms?

Golfer's elbow causes pain in the elbow at the side closest to the body. You may also have pain along the entire inner side of the forearm when the wrist is bent. You may have pain when you make a fist.

How is it diagnosed?

Your healthcare provider will examine your elbow and find tenderness at the medial epicondyle.

How is it treated?

You should apply ice packs to your elbow for 20 to 30 minutes every 3 to 4 hours for 2 or 3 days or until the pain goes away.

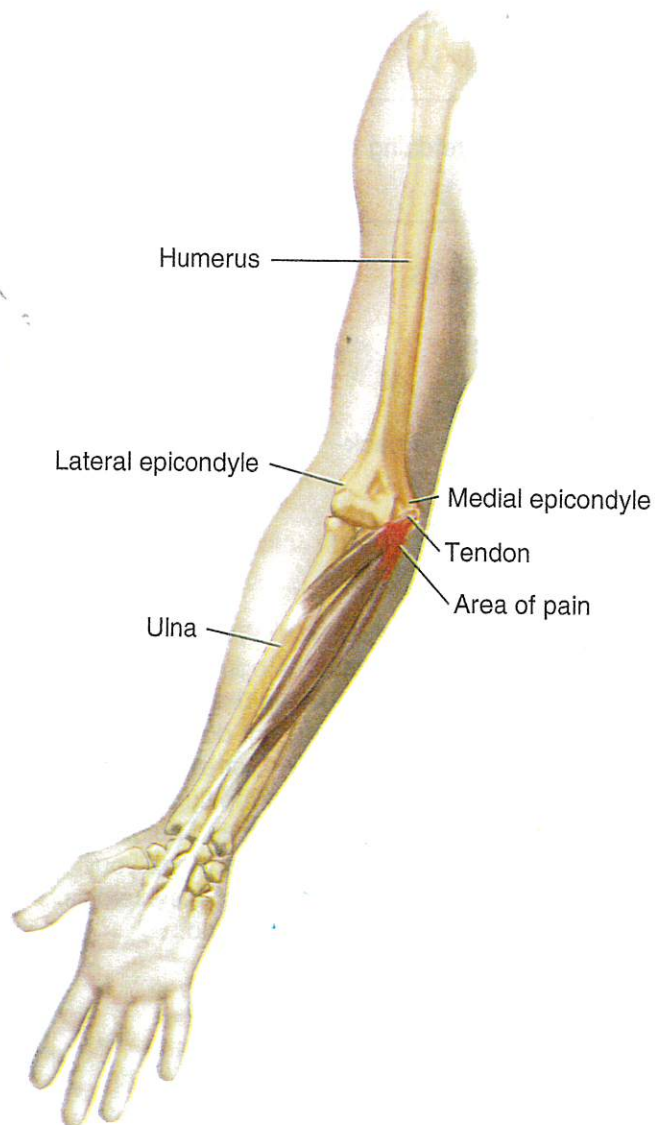
If your elbow is swollen, you should elevate it by placing a pillow underneath it when you are lying down and by elevating it on the back of a chair or couch while sitting. You may be given an elastic bandage to wrap around your elbow to keep it from swelling.

While you are recovering from your injury, you will need to change your sport or activity to one that does not make your condition worse. For example,

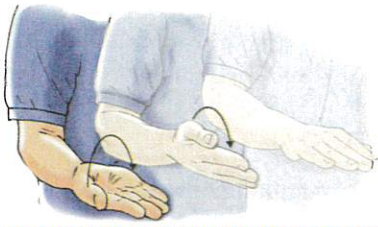
instead of playing golf you should walk, or write things out by hand instead of typing.

Your healthcare provider may prescribe a tennis elbow strap for you to wear just below the tender spot on your elbow. This will allow the forearm muscles to pull against the strap instead of against the painful epicondyle. Your provider may prescribe an anti-inflammatory medicine (adults aged 65 years and older should not take non-steroidal anti-inflammatory medicine for more than 7 days without their healthcare provider's approval). He or she may give you an shot of a corticosteroid medicine around the medial epicondyle to reduce the inflammation. You

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5. FOREARM PRONATION AND SUPINATION: With your elbow bent 90°, turn your palm upward and hold for 5 seconds. Slowly turn your palm downward and hold for 5 seconds. Make sure you keep your elbow at your side and bent 90° throughout this exercise. Do 3 sets of 10.

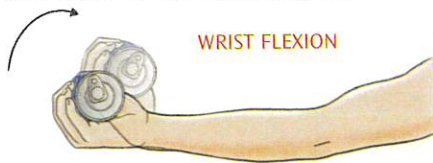


FOREARM PRONATION AND SUPINATION

When this exercise becomes pain free, do it with some weight in your hand such as a soup can or hammer handle.

Strengthening exercises

6. WRIST FLEXION: Hold a can or hammer handle in your hand with your palm facing up. Bend your wrist upward. Slowly lower the weight and return to the starting position. Do 3 sets of 10. Gradually increase the weight of the can or weight you are holding.



WRIST FLEXION

7. WRIST EXTENSION: Hold a soup can or hammer handle in your hand with your palm facing down. Slowly bend your wrist upward. Slowly lower the weight down into the starting position. Do 3 sets of 10. Gradually increase the weight of the object you are holding.



WRIST EXTENSION

8. GRIP STRENGTHENING: Squeeze a rubber ball and hold for 5 seconds. Do 3 sets of 10.



GRIP STRENGTHENING