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"treating the cause of your problem, not just the symptoms"

Tennis Elbow Anyone?

This week will discuss one of the more prevalent injuries in the arm. It is called "lateral epicondylitis" but is commonly known as "tennis elbow". With the warmer temperatures of summer comes an increased level of activities such as sports or yard work. The muscles in your forearms can be exposed to more physical labor than they are accustomed to. This can lead to problems, particularly if specific movements of the forearm are done repetitively.

Imagine it was the weekend and the weather was just right to finally get started on painting your house. Knowing that our weather had been quite unpredictable prior to that week, you wanted to get as much accomplished as possible. You soon realized that there is a lot more area that had to be painted with a brush than expected. After a few hours of repetitively stroking the paintbrush up and down, the outside part of your elbow started to fatigue and burn slightly. But, the weather was still nice and you had to get as much done as possible, so you kept going. The end of the day came and you were proud to of finished over half of the entire house all by yourself. Exhausted and in the middle of a nasty headache from the dehydration of sun-stroke, you went to bed. That night, you rolled over in bed and felt a sharp pain at the outside of your elbow. You then noticed that your wrist couldn't fully bend backwards because the muscles at the back of the forearm were very tight and sore. While massaging these muscles, you touched the bony bump at the outside of the elbow. This produced a very sharp pain and made you jump. All night the elbow, forearm, and sometimes even the upper arm ached. The next day the pain and weakness was even worse and you couldn't use the forearm at all. You already had an appointment that afternoon with your chiropractor for the low back injury you were just getting over from shoveling improperly and for too long the weekend prior; so, you asked him to have a look at it. After a quick examination of your arm, he asked what you were doing when this started. You then showed the stroking motion you were doing with your forearm all the previous day and he cringed. He then told you that the pain and weakness was from lateral epicondylitis.

“Lateral epicondylitis”, or “tennis elbow” as it is commonly called, is an irritation of the tendons of the forearm where they attach to the outside of the elbow. Each muscle in the body ends by forming a tendon. The tendon is what attaches firmly to the bones. When a muscle contracts, it pulls on the tendon, which in turn, pulls on the bone. This is how we move all our limbs. If the muscles of the forearm are repetitively contracted, as when you are painting, the tendons are also being pulled repetitively. If done long enough, the end of the tendon that attaches to the bone experiences microscopic tears. The muscles become very tight and the actual spot where the tendon attaches to the bone will be very painful to touch.

The more official term is “lateral epicondylitis”. It was given this name because the bony part of the elbow that the tendon attaches to is called the “lateral epicondyle” of the upper arm bone. The “itis” at the end of the term just means “inflammation of”

To prevent this from happening, simply do not repetitively bend your wrist backwards. It can occur from even just holding your wrist back in one position for long periods of time, as when using the mouse on a computer incorrectly at work each day. As I always tell my patients, the best way to cure a problem is to prevent it from occurring in the first place.

If you are unlucky enough to recently experience lateral epicondylitis, the first thing you should do is apply a cold compress or ice pack to the outside of the elbow for ten to fifteen minutes at a time. Do this a few times a day. Your Medical Doctor may give you some anti-inflammatory medication as well. It is at this point that we usually see these people walk into our office. Once the acute inflammation has subsided, we use a modality called interferential current to help speed up the healing process. The muscle knots in the forearm must also be dealt with. This is a tender but necessary process. When the arm is ready, we then give the patient strengthening and stretching exercises to do. This will help restore the arm to its normal functional state. If needed, a specific brace around the forearm may be required to take some of the stress off the tendons and muscles as they heal.

Finally, if you have lateral epicondylitis, do not ignore it! Seek professional help because if it becomes chronic, it will occur more frequently and with a greater intensity.

