Tennis Elbow (Lateral Epicondylitis)

Tennis Elbow is a common condition characterized by pain over the outer aspect of the elbow and it is aggravated by force-exertion activities. It occurs most commonly in people of 35-50 years of age. Research shows that tennis elbow is a degeneration of soft tissue rather than an inflammatory condition only. It is also known as a common occupational repetitive stress injury (RSI).



Signs and symptoms

Initially there may be swelling around the outer elbow, which is a sign of acute inflammation and it is particularly obvious after a sudden strain or trauma. Gradually, pain and weakness become more dominant due to the failure of soft tissue healing. The above symptoms occur while using the forearm and wrist, such as holding a knife or fork, twisting a towel or lifting a heavy object. For some people the pain can be constant and they may have pain and find it difficult to straighten their arm fully.

Common causes of tennis elbow

- Sudden strain because of unusual activity, for example, suddenly playing a lot of tennis while on holiday
- Poor elbow and wrist positions in activities, for example, poor ergonomics when using computers and keyboards
- · Lack of strength and flexibility of forearm
- Overuse elbow or repetitive micro-trauma, for example, frequent gripping and twisting
- Racket sports with poor technique

Treatment options

1. Anti-inflammatory and other painkillers

Anti-inflammatory or painkillers such as ibuprofen are commonly used to ease the pain in tennis elbow. Some anti-inflammatory and painkillers also come as creams or gels which you can rub over the painful area. Please ask a doctor or a pharmacist for advice.

2. Physiotherapy

- · Advice on modifying activities
 - Rest, avoid lifting, gripping and twisting movements that can aggravate the pain
 - Modify activities and cut out repetitive movements of the arm or hand, to avoid excessive stress on the muscles
 - If the tennis elbow has been brought on by playing sports, seek advice from a professional coach about techniques and racket grip size, etc.

- Ice therapy
 - Apply an ice pad to the painful area for 15-20 minutes, 1-3 times per day (especially after painful activities)
- Manual therapy, soft tissue massage, ultrasound or other electrotherapy
- Stretching exercises
- · Strengthening exercises
- *Physiotherapists will recommend appropriate exercises at different stages of the condition.
- Prescription of tennis elbow band to reduce the loading to the muscles and tendons

3. Steroid injection or Surgery

If the above measures do not work, or if there is severe pain and difficulty using the arm, a steroid injection may ease the pain. For some people, the pain never returns after having a steroid injection. However, the relief from pain often lasts for a short time - perhaps for a few weeks. Therefore, physiotherapy treatment after steroid injection is important to reinforce the treatment effect.

If symptoms persist for a long time and are really troublesome, the specialist may advise surgical intervention. The common operation to ease the symptoms is to remove the damaged part of the tendon. However, only a small number of people require surgery.



How long will it take to recover?

As the tendons take a longer time to heal, the pain from tennis elbow usually lasts for six to twelve weeks. However, in some people the pain can last up to six months to two years.

Stretching exercises

Strengthening

exercises

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網球附

網球肘是一種常見痛症,患者的手肘外部感到疼痛,而痛楚會隨著患者活動時用力而加劇。網球肘最常見於35至50歲人士身上,有研究指出網球肘不單是患處發炎,還牽涉軟組織退化,是最常見的職業性慢性勞損 (Repetitive Stress Injury) 之一。



症狀

外肘部分初時可能會腫脹,這是急性發炎的徵狀。當突然受壓或 創傷後,徵狀尤其明顯。由於軟組織未能復原,痛楚和肌肉無力 的情況會慢慢變得嚴重。患者使用前臂和手腕時,如拿起刀叉、 扭毛巾或搬重物時,以上症狀也會出現。某些人更會持續疼痛, 可能難以完全伸直手臂,或伸直時感到痛楚。

網球肘的常見成因

- · 進行一些不經常做的活動,對外肘構成壓力,如忽然在假期時 長時間打網球
- · 活動時手肘和手腕位置欠佳,如使用電腦和鍵盤時姿勢不正確
- 前臂缺乏力量和靈活性
- · 過度運用手肘或重覆性輕微創傷,如經常作緊抓和扭動的動作
- 握拍和揮拍時技術不足

治療方法

1. 消炎藥和止痛藥

消炎藥或止痛藥如布洛芬是治療網球肘疼痛的常用藥物。一些 消炎藥和止痛藥更被製成膏狀或凝膠狀,可塗抹在痛處。有關 藥物的使用,請先諮詢醫生或藥劑師的意見。

2. 物理治療

- 活動的調節
 - ← 休息,避免提重物、緊握和扭動等動作, 以免增添痛楚
 - ← 改良動作,避免手臂或手部作重覆性動作,以免肌肉承受過多壓力
 - 如網球肘是由於運動引起,應向專業教練 尋求技術改良、握拍技巧和球拍大小選擇 的意見



- ←用冰袋敷在患處15至20分鐘, 每天1至3次
- · 徒手治療、按摩軟組織、超聲波治 療或電療
- 伸展運動
- · 強化運動
- *物理治療師會因應情況建議作適當的







· 建議使用網球肘護肘,以減低對肌腱的 壓力

3. 注射類固醇或手術

如以上療法都不奏效,或痛楚十分嚴重,而且手臂運用有困難,便可能需注

射類固醇。注射類固醇後,部分人會不再疼痛,但通常止痛效 果很短暫,大約維持數周。故此注射類固醇後,應接受物理治療,以加強治療效果。

如症狀持續一段時間、且帶來極大不便,專科醫生或會建議進行手術治療。一般是透過手術切除腱部的受損部分,但只有少

數人需要進行手術。



由於腱部需要較長時間復原,網球肘所帶來的痛楚通常長達6至12周,但某些人的痛楚可能長達6個月至2年。



撰寫: 明德國際醫院物理治療部

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