

Training the best treatment for tennis elbow

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Training and ergonomic advice are more effective than anti-inflammatory drugs and cortisone injections in treating tennis elbow, and give fewer side effects. This is the conclusion of a thesis presented at the University of Gothenburg, Sweden.

The thesis describes, among other topics, the selection of treatment by healthcare personnel, their experiences when treating patients with [tennis elbow](#), and the results from a training programme for tennis elbow. Healthcare personnel in Halland, including GPs, orthopaedic surgeons and physiotherapists, replied to a questionnaire. "It became clear that treatment with medication has side effects in many cases. Most side effects were reported from just those treatments that are often the treatment of choice for tennis elbow by GPs, which are [cortisone injections](#) and anti-inflammatory drugs", says Pia Nilsson, physiotherapist and scientist at the Sahlgrenska Academy.

She has also studied the results from a new structured training programme for tennis elbow. Seventy-eight patients were included in the first pilot study, which lasted for four months, while 297 patients took part in the follow-up study, which was carried out two years later. Their treatment involved following a home-training programme in order to build up strength in the elbow muscles. The patients need to increase their strength, since these muscles are fixed to the hand. This means that a patient's grip strength becomes weaker when these muscles are weakened.

This can lead to the patient experiencing difficulty in his or her work,

and being forced to take sick leave. Pia Nilsson explains that ergonomic advice can enable the patient to adapt to any difficulties at work, and many can continue to work with the aid of wrist support.

"It may be painful at night since many people sleep with a bent elbow, leading to difficulty straightening it in the morning. The bending of the elbow can be prevented with a simple night bandage and this facilitates the healing of the muscles", says Pia Nilsson. She continues:

"A treatment programme designed by a physiotherapist and occupational therapist together reduces the patients' pain, increases the function of the elbow and hand, and reduces the duration of sick leave. This programme heals tennis elbow better than cortisone injections. The method can provide benefits to the patient, the employer and society in general."

More information: The full text of the thesis is available from:
hdl.handle.net/2077/22942

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