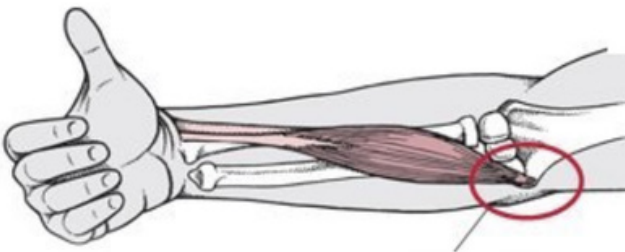


TENNIS ELBOW AND GOLFER'S ELBOW

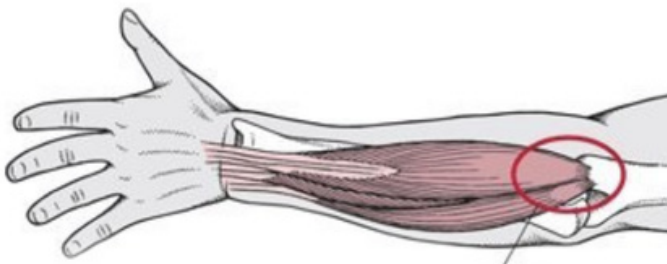
- ▶ **SJOG WEXFORD MEDICAL CENTRE**
Suite 15, 3 Barry Marshall Parade,
Murdoch WA 6150
- ▶ **MURDOCH SQUARE**
Suite 205, 44 Barry Marshall Parade,
Murdoch WA 6150
- ▶ **SJOG MT LAWLEY MEDICAL CENTRE**
Suite 113, Ellesmere Road,
Mt Lawley WA 6050

WHAT IS TENNIS ELBOW & GOLFER'S ELBOW?

Tennis elbow (**lateral epicondylitis**) and golfer's elbow (**medial epicondylitis**) are conditions caused by irritation or degeneration of the tendons where they attach at the elbow. Despite their names, these conditions can occur in individuals who do not play tennis or golf.



Medial Epicondylitis "Golfer's Elbow"



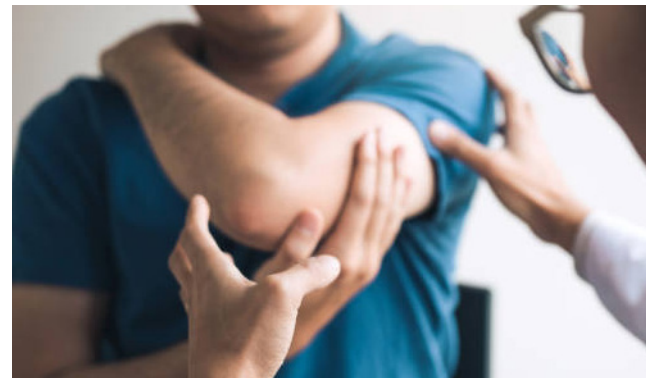
Lateral Epicondylitis "Tennis Elbow"

- **Tennis elbow** affects the **outside of the elbow**, involving the **extensor tendons**.
- **Golfer's elbow** affects the **inner side of the elbow**, due to repetitive use of forearm and wrist muscles.

Tennis elbow and golfer's elbow are **common but treatable conditions**. Early intervention with **non-surgical treatments** can be highly effective, and surgery is reserved for severe cases. If you have questions or concerns, consult your specialist for further guidance.

WHAT MIGHT I NOTICE?

- **Pain over the bony prominence** on the inner or outer elbow
- **Pain extending down the forearm** to the wrist and hand
- **Increased discomfort with wrist movement** (bending, extending, or grasping objects tightly)



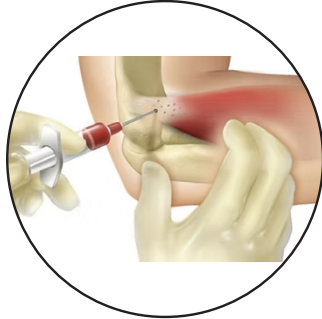
WHAT TESTS MIGHT WE DO?

- **Examination:** Patients typically localize the pain well.
- **Additional imaging:** In some cases, ultrasound or MRI scans may be required.

TREATMENT OPTIONS

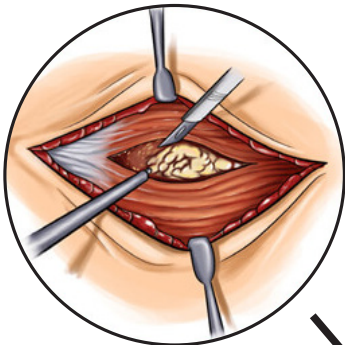
NON-OPERATIVE TREATMENT

- **Activity modification** to reduce strain on tendons
- **Painkillers and anti-inflammatory medications**
- **Tennis elbow strap** to limit tendon stress
- **Ice therapy** to reduce inflammation
- **Physiotherapy** (effective in up to 70% of cases)
- **Injections:**
- **Steroid injections** for short-term relief
- **Platelet-rich plasma (PRP) injections** (may be more effective but costly)

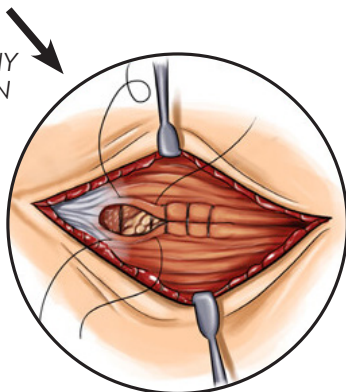


OPERATIVE TREATMENT

- **Surgery for severe cases** that do not respond to other treatments
- **Procedure involves a small incision** to remove damaged tissue
- **Day-case surgery** with a recovery period of up to three months



REMOVING UNHEALTHY TISSUE WITHIN TENDON



REPAIRING RESIDUAL TENDON TOGETHER OR BACK TO BONE

POST-TREATMENT & PREVENTION

- **Physiotherapy exercises** to strengthen muscles and prevent recurrence
- **Using proper techniques** when lifting objects or playing sports
- **Gradual return to activities** to avoid re-injury

POSSIBLE COMPLICATIONS

- **Some cases do not fully resolve**, even after surgery
- **Ongoing pain** despite multiple treatment attempts
- **No universal cure**, requiring a tailored approach for each patient

WHAT IF YOU HAVE A PROBLEM?

If you have any concerns once you are discharged from hospital you should either telephone the hospital ward, or the surgeons rooms. If they are not available you should consult your GP or local ED. Your surgeon would always want to know about any issues or complications, and would want the GP or nurse to call them to discuss the problem.

Further information is available on the OrthopaedicsWA website.

PHONE: 08 9312 1135 • FAX: 08 9332 1187

www.orthopaedicswa.com.au