Medial Epicondylitis (Golfer's Elbow)

Medial epicondylitis is characterized by inflammation of the bony prominences of the medial elbow joint. Medial epicondylitis often occurs in golf players, hence its alternative name "golfer's elbow". It is caused by an overuse of the elbow, particularly wrist flexion and forearm pronation. Symptoms include pain near the medial epicondylitis, especially upon wrist flexion and forearm pronation. Treatment includes conservative management, injections, and surgery.



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Characteristics

Overuse Injury of Flexor Tendons
Overtime Injury-sign and Flexing Protein-man
Medial epicondylitis is often caused by repetitive wrist flexion and forearm pronation. While it is known as "golfer's elbow", about 90% of cases occur in occupational settings or are idiopathic.

Wrist Flexion
Flexing Wrist
Medial epicondylitis can be caused by repetitive wrist flexion. Golfing and manual labor are often associated with this motion.

Forearm Pronation
Pronated-primate Forearm
Medial epicondylitis can be caused by repetitive forearm pronation. Golfing and manual labor are activities associated with this motion.

Pain over Medial Epicondyle
Pain-bolts over Metal E-pick-cone
Symptoms of medial epicondylitis include pain that is elicted when the patient is flexing with elbow held in extension. About 75% of cases occur in the patient's dominant arm.

Management

Conservative Management
Conservative Manager being Conservative with Treatment
Medial epicondylitis can be managed by conservative therapy including physical therapy, orthotics, rest, icing, compression, and elevation.

Injections
Injection-syringe
Injections of saline plus lidocaine or glucocorticoids can also serve as appropriate treatment for medial epicondylitis.

Surgery
Surgeon
Surgery is a form of treatment for medial epicondylitis and serves as a last resort after exhausting previous options and no improvment or worsening of symptoms after >6 months.

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