

Lateral Epicondylitis Surgery (Tennis Elbow)

Indications for Surgery

Lateral epicondylitis (tennis elbow) is the most common painful condition of the elbow. Tendon injury and pain occur on the outer side of the elbow where tendons of muscles attach to the bone. The structures involved are the tendons of the forearm that bring your wrist back (extend the wrist). This occurs not only in tennis players, but also in anyone who performs repeated resisted motions of the wrist. When this problem persists despite physical therapy, stretching, injections, etc., surgical treatment is indicated to remove the damaged part of the tendon and repair healthy tendon back to the bone.



Disruption of the common extensor
tendon with increased signaling (swelling) at
the injury site

Contraindications to Surgery

- Infection
- No functional impairment (elderly, sedentary persons, etc.)
- Inability or unwillingness to complete the postoperative program of limiting activity after surgery and to complete the rehabilitation necessary



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Surgical Risks and Complications

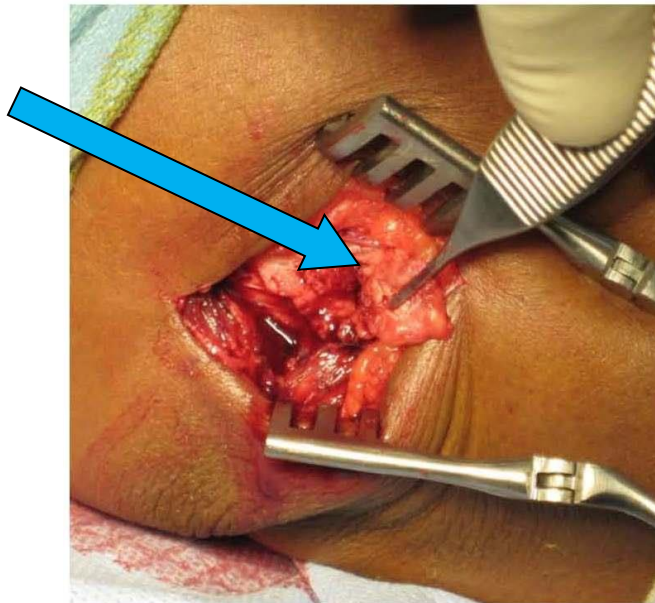
- Infection
- Injury to nerves (numbness)
- Re-rupture of the tendon from the bone
- Elbow or wrist and forearm stiffness and loss of some motion at the elbow, wrist, or forearm
- Heterotopic ossification, abnormal bone formation in the soft-tissues surrounding the repair
- Persistent tendinosis and symptoms because of incomplete rehabilitation

Hospitalization and Anesthesia

- Outpatient surgery (you go home the same day)
- General anesthesia with local anesthetic (numbing medicine at the surgical site)

General Surgical Technique

Dr. Chudik performs this surgery through one small incision on the outer side of the elbow. Through the small single incision, Dr. Chudik cleans up the damaged part of the tendon, prepares the tendon attachment site on the bone, and places a suture anchor in the bone. Then, the sutures from the anchor in the bone are passed through the torn end of the tendon and tied to reattach the tendon to bone. The wound is closed and the elbow is splinted a flexed position to protect the repair.



Damaged extensor tendon



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Postoperative Course

- Splint is applied to the elbow from shoulder to hand for two weeks, followed by a wrist splint for an additional four weeks.
- Driving for the first two weeks following surgery with the elbow immobilized in a splint is not advisable.
- Keep the wound clean and dry for 10-14 days following open surgery. Showering lightly is allowed after 14 days (open surgery) but wounds cannot be submerged under water for three weeks.
- Return to school/sedentary work in less than one week as long as you are in your sling/splint and do not use the extremity. No typing, writing or purposeful movement.
- Physical therapy should begin two to three days after surgery and continue for four months. The success of lateral epicondylitis surgery is highly dependent on the post-operative rehabilitation. It is crucial to follow through on and maintain a proper therapy schedule.

Return to Activity

- A return to sports depends on the type of sport and position and the quality of the tendon at the time of repair.
- A minimum of four to six months is necessary following surgery before return to repetitive movement and heavy lifting.
- Full elbow and wrist motion and strength are necessary before returning to sports/work.

Preoperative instructions

- Discontinue birth control pills
- Stop blood thinners (aspirin, Coumadin[®], Lovenox[®], Xarelto[®]) according to the prescribing doctor's directions
- Stop anti-inflammatory medicines (ibuprofen, Advil[®], Motrin[®], Naprosyn[®], Alleve[®], etc.)
- Stop Nutritional supplements and drinks (Vitamin C, ginseng, ginkgo biloba, etc.)
- Stop smoking for surgery and during the first six weeks postoperatively to allow proper healing of tissues
- Do not eat or drink anything from midnight, the evening before surgery

Scheduling Surgery

Contact Dr. Chudik's surgery scheduler at 630-324-0402 or contactus@chudikmd.com to:

- Schedule the date and location of surgery. The Hospital will call you the day before with the time.
- Schedule an appointment with Dr. Chudik's Assistant to complete pre-operative surgical education and other requirements.
- Schedule a post-operative appointment with Dr. Chudik's Assistant to remove sutures, and review post-op instructions.



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Notify My Office If Symptoms Worse

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