

The Courtyard Clinic

Physical
Health



Osteopathy/Physiotherapy Sports & Remedial Massage

- Back, Neck & Shoulder pain
- Joint & Muscle Injuries
- Headaches
- Arthritis
- Rib Pain
- Sports Injuries

Podiatry/Chiropody

- Toenail Problems
- Corns & Callouses
- Verrucae
- Diabetic Foot Checks
- Foot Odour
- Footwear Advice



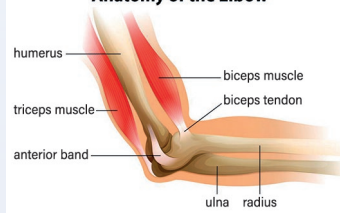
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ANATOMY

The elbow is made up of three bones. The bone of your upper arm (known as the humerus), and the two forearm bones (known as the radius and ulna). It is classified as a 'modified hinge joint' because it bends like a hinge, but also has an extra range of motion that makes it different. The joint between the humerus and the ulna/radius is the main elbow joint, which bends and straightens the arm like a hinge. The link between the radius and ulna allows the forearm to twist, turning your palm up and down, this is the extra range of motion that makes the elbow a modified hinge.

Anatomy of the Elbow



Many important muscles cross the elbow joint, providing movement and strength. The main muscles to bend the elbow like a hinge are the biceps (bending) and the triceps (straightening). The biceps tendon is prone to inflammation, often associated with repetitive strain. It can occasionally rupture, (where the tendon comes away from its attachment at the bone) this is usually due to a trauma. It is unusual to suffer similar injuries with the triceps.

The elbow is stabilised by some very important ligaments on the inner and outer joint surfaces (these are known as collateral ligaments), which can be damaged from a fall or repetitive sports, such as cricket. Over a long period of time, repetitive strains to a ligament can cause it to become lax resulting in the elbow becoming unstable.

Several nerves pass over the elbow. Injury, inflammation and muscular tightness around the elbow can irritate these nerves and create pain, weakness and numbness in certain parts of the hand, forearm and wrist.

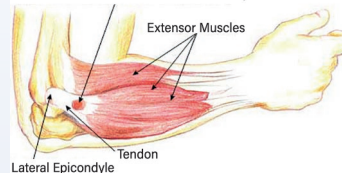
The muscles in our forearms are mainly for moving our wrist

Tennis & Golfers Elbow

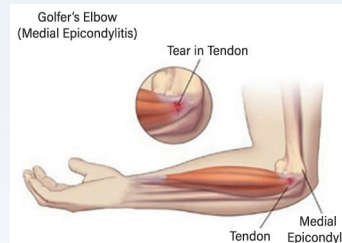
and fingers. These are broadly divided into two groups. Those which extend the wrist and fingers back are known as extensors and those that flex them, known as flexors.

TENNIS AND GOLFERS ELBOW

Overuse of the extensor muscles leads to pain here



You may have heard of elbow pain being referred to as 'golfers' or 'tennis' elbow. These conditions are named after sports that they might be associated with but are not exclusive to. These conditions may be aggravated by strain through repetitive movements of the forearm and wrist. The muscles that move the wrist attach on the inside and outside of the elbow and excessive strain can cause the attachments to become inflamed. This causes pain at the elbow, aggravated by wrist and hand movements, pain in the forearm, and sometimes numbness and pins & needles. If this occurs on the outside of the elbow, it is the muscles that extend the wrist that are involved. This is known as tennis elbow or lateral epicondylitis. If it occurs on the inside of the elbow, it is the muscles that flex the wrist that are involved. In this case it is known as golfers elbow or medial epicondylitis.



We also notice a postural predisposition to elbow tendonitis, particularly with protracted (rounded) shoulders and mobility issues in the upper back and shoulders. It is always important to look

at the way the body is working as a whole rather than just where the pain is, so we can treat the body with the problem rather than just the problem in the body. At The Courtyard Clinic, we find that this more holistic approach to treatment means that reoccurrence of the injury is much less likely.

TREATMENT:

The type of treatment and recovery time will depend on the severity of the condition.

Treatment is initially focussed on addressing any muscular tightness in the forearm and any restricted movement in the elbow or wrist before looking more globally at posture and movement in the upper back and neck. Treating these areas can speed recovery and prevent recurrence.

Ultrasound can help to reduce inflammation and promote tissue healing as can contrast bathing with warm and cold compresses.



It is also important to reinforce the treatment with stretching and strengthening exercises. Keeping the muscles strong and flexible, as well as using the proper form when playing sports, lifting heavy objects or even working at a computer will help prevention. Make sure you warm-up areas that have been previously injured, and use ice and stretches for the elbow and arm muscles after exercise if you notice any discomfort.

In very difficult cases you may need to be referred to a consultant. Various injections may help recovery and in very extreme cases surgery may be required on the tendon, although this is fairly rare.

The Courtyard Clinic - Osteopathy, Physiotherapy, Massage Therapy, Podiatry/Chiropody



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