

## Surgery for Tennis Elbow

### What is Tennis Elbow?

Tennis elbow is a condition resulting from **degeneration of the tendons** on the outer side of the elbow, leading to **pain, stiffness, and occasionally weakness**. It primarily affects individuals over the age of **30** and can be aggravated by **routine activities** such as **twisting a jar lid**.

Your surgeon has recommended a **tennis elbow release** as a potential treatment. However, the decision to proceed with surgery is entirely yours.

This document provides essential information about the **benefits and risks** of the procedure to help you make an informed decision. If you have any unanswered questions, consult your **surgeon or healthcare team**.

Once all your concerns have been addressed and you feel ready to proceed, you will be asked to sign an **informed consent form**, marking the final step in the decision-making process. However, you retain the right to change your mind at any time before the procedure.



The tendons of a right elbow

## Benefits of Surgery

In approximately **9 out of 10 cases**, tennis elbow resolves naturally within a year without surgical intervention. The primary benefit of surgery is **faster symptom relief** compared to conservative management.

## Non-Surgical Treatment Options

Since tennis elbow is a **self-limiting condition**, symptoms often improve as **activities are modified**. However, full recovery may take up to **two years**.

- **Activity Modification and Rest** – Avoiding movements that provoke symptoms can aid healing.
- **Physiotherapy** – A physiotherapist can provide **exercises and stretches** to restore elbow function more quickly.
- **Splinting** – Some individuals benefit from **wrist or elbow splints** that restrict movement to reduce tendon strain.
- **Steroid Injections** – A corticosteroid injection into the **elbow joint** can provide temporary relief, but symptoms recur in **1 in 3 people** within three months. Frequent injections can lead to side effects.
- **Platelet-Rich Plasma (PRP) Injections** – A concentrated **platelet injection** from the patient's own blood may **enhance healing** by stimulating tissue repair. This treatment often causes **temporary pain and stiffness** lasting about a week.
- **Hyaluronic Acid Injections** – In some cases, **hyaluronic acid**, a natural component of **joint fluid**, may help improve symptoms.

Surgery is generally recommended **only if symptoms persist beyond three months and conservative treatments have failed**.

## What Happens If Surgery is Declined?

If surgery is not pursued, **continued rest and symptom management** are advised. Your surgeon or physiotherapist may recommend **ongoing conservative treatment**.

## Surgical Procedure

Before surgery, **remove any rings from your affected hand**.

The **healthcare team** will conduct multiple checks to ensure the correct procedure is performed on the **appropriate elbow**. You will also be asked to confirm your **identity and procedure details**.

### *Surgical Approaches*

**Tennis elbow release** can be performed using either **keyhole (arthroscopic) surgery** or **open surgery**.

- **Arthroscopic (Keyhole) Surgery** –
  - Usually performed under **general anaesthesia**, but a **nerve block** may be an alternative.
  - Small incisions allow the use of a **telescope and surgical instruments** to remove damaged tendon tissue.
  - Associated with **less pain, minimal scarring, and faster recovery**.
- **Open Surgery** –
  - Performed through a **4–5 cm incision** on the outer elbow.
  - The surgeon removes **degenerative tendon tissue** and repairs any associated issues.
  - The wound is closed using **stitches or adhesive plasters**.

The procedure typically lasts **around 30 minutes**, and a **tourniquet** is used to reduce bleeding.

## Potential Complications

### *General Risks of Surgery*

- **Bleeding** – The risk is minimal due to the use of a **tourniquet**.
- **Infection** – Showering is usually safe after **two days**, but the wound should remain **clean and dry**. Symptoms of infection include **redness, swelling, pus, or fever**.
- **Allergic Reactions** – Inform your doctor of any **known allergies** to medications, surgical materials, or dressings.
- **Chest Infection** – The risk is lower if you have **stopped smoking** and have been **free of COVID-19 symptoms for at least seven weeks** before surgery.

### *Specific Risks of Tennis Elbow Release*

- **Bleeding into the Joint (1 in 100 cases)** – May cause **pain and swelling**, occasionally requiring an additional **arthroscopy**.
- **Joint Infection (<1 in 100 cases)** – Treated with **antibiotics**, and in some cases, an additional procedure to clean the joint may be necessary.
- **Complex Regional Pain Syndrome (CRPS)** – A rare condition causing **severe pain, stiffness, and functional loss** in the hand or arm, requiring **pain management and physiotherapy**. Recovery may take **months to years**.
- **Nerve Damage (1 in 100 cases)** – May result in **weakness, numbness, or persistent pain**, with a **higher risk in arthroscopic procedures**. While most cases resolve, some may be permanent.
- **Radial Nerve Injury** – The **radial nerve** is close to the surgical site and may be bruised, leading to **temporary weakness in finger extension**. Rarely, this can be permanent.
- **Persistent Symptoms (1 in 10 cases)** – A small percentage of patients may **continue to experience discomfort** despite surgery.

## Postoperative Considerations

### *Pain Management & Wound Care*

- **Pain Control** – Medication will be provided to manage discomfort. Take it **as directed** to aid recovery.
- **Scarring** – **Arthroscopic scars** are typically **small and well-healed**.

### *Recovery Timeline*

#### **In Hospital:**

- After surgery, you will be moved to the **recovery area** before being transferred to the ward.
- Your **surgeon or physiotherapist** will advise on the duration for which your arm should remain supported.
- Most patients **go home the same day**, though a longer stay may sometimes be recommended.

#### **Returning Home:**

If you had **sedation or general anaesthesia**:

- A **responsible adult** should drive you home and stay with you for at least **24 hours**.
- Avoid **driving, operating machinery, cooking, or signing legal documents** for at least **24 hours**.
- Keep a **telephone nearby** in case of an emergency.

## Wound Care & Activity Modification:

- Keep your **wound dry** for **4–5 days** and use a **waterproof dressing** while showering.
- **Stitches are usually removed within 1–2 weeks.**
- Follow your **physiotherapist's exercise program** to regain **strength and mobility** in your elbow.
- Avoid **lifting heavy objects or playing contact sports** until cleared by your healthcare team.

## Physical Activity:

- Engage in **regular exercises** to facilitate recovery but consult your **physiotherapist or GP** before starting any new activities.
- Do not **drive or cycle** until you can fully control your vehicle, including in emergencies. Always check with your **surgeon and insurance provider** before resuming driving.

## Long-Term Outlook

- Most individuals **experience significant improvement** and **return to normal activities more quickly** following surgery.
- Persistent symptoms occur in **1 in 10 cases**.

## Summary

Tennis elbow is a **degenerative tendon condition** affecting the **outer elbow**. In most cases (**9 in 10**), it resolves **without surgery** over the course of a year. Surgery is typically considered **only when symptoms persist beyond three months despite conservative treatment**.

While the procedure is generally **safe and effective**, understanding the potential risks allows for an **informed decision** and **early management of complications** if they arise.

Keep this document as a reference, and consult your **healthcare team** for personalized advice. Some risk estimates are based on **global studies** and **databases**. Your surgeon can provide **individualized risk assessments** and **alternative treatment options** as needed.

**Note:** This document is intended for informational purposes only and does not replace professional medical advice.

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