



New Evidence-based Clinical Treatment for Lateral Epicondylitis Now Offered at Florida Hospital Sports Medicine and Rehabilitation

Lateral epicondylitis, or tennis elbow, is the most common repetitive strain injury in the United States. Traditional approaches to treatment include:

- ▶ Cortisone injection
- ▶ Rest/bracing
- ▶ Rehabilitation/therapy, including ultrasound, electrical stimulation, stretching/strengthening exercises and education

Review of the literature on how to clinically manage this complaint reveals a new approach with promising results. Recent evidence supports the manual therapy approach, or mobilization with movement (MWM), as a complement to traditional treatment. MWM was developed in New Zealand by Brian Mulligan and recent research supports the clinical effectiveness of this technique for the treatment of lateral epicondylitis (see references).

Results of specific studies:

▶ MWM

Eight sessions of MWM resulted in a significant reduction in severity of symptoms and improved pain-free gripping in both short- (six weeks) and long-term (three to twelve months) outcomes. (Bisset L, et al.)

Risk of recurrence: MWM therapy resulted in a 90 percent reduction in the risk of recurrence of injury.

▶ MWM and ultrasound

The MWM plus ultrasound group demonstrated a 97 percent decrease in pain as well as a significant increase in lifting ability compared to ultrasound alone (29 percent decrease in pain) or the control group. Patient-reported outcomes improved significantly in the MWM plus ultrasound group, but no improvement was noted in the ultrasound or control group. (Kochar and Dogra)



The hand therapists at Florida Hospital have been trained in the Mulligan MWM technique and have found it to be a useful tool in the treatment of lateral epicondylitis. We would welcome the opportunity to discuss this treatment approach as well as assist in the care of your patients with lateral epicondylitis.

To refer your patients for therapy, call (407) 303-8080 or visit www.FHSportsmed.com.

References

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