

# Arthroscopic treatment of the refractory lateral epicondylitis and associated synovitis - preliminary report -

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## Introduction

In refractory epicondylitis, open ECRB release was usually recommended. We experienced symptomatic improvement after arthroscopic ECRB release and analyzed its results comparing to open release.

## Materials and methods

During the past 1 year, we performed arthroscopic ECRB release in 13 patients with persistent pain after conservative treatment for more 6 months or open ECRB release. Debridement of degenerated ECRB was done with standard arthroscopic technique. Associated synovitis was found in 2 cases, where previous open method was failed. After one or two days of immobilization, AAROM exercise program started.

Patients were evaluated at each interval for pain, ROM, and posterolateral rotatory instability clinically.

## Results

Average age is 41.5 years. Average time interval to operation is 11.9 months. There were 10 male(4 patients were involved in work compensation) and 3 female, followed up for more than 6 months. Symptom disappeared in 10 patients at average 2.2 months. 10 patients returned to their job, but 2 work compensation related patients and 1 patient with degenerative arthritis did not. VAS was 85%(No pain 100%). There was no ROM change postoperatively. No patient complained of instability clinically. In 2 cases with synovitis, they had not symptomatic improvement with previous open ECRB release, but all felt comfortable after arthroscopic ECRB release and partial synovectomy.

## Conclusion

Arthroscopic treatment of the refractory lateral epicondylitis may be effective method because intra articular pathology such as associated synovitis, synovial plica or chondral lesion can also be treated.

The results are also comparable to that of the reported open method.  
Now we choice arthroscopic ECRB release as primary treatment for the refractory lateral epicondylitis.

#### Key Word

arthroscopic ECRB release - refractory lateral epicondylitis