

Dr. J. Whitcomb Pollock

“A randomized, double-blind sham-controlled trial on the efficacy of arthroscopic tennis elbow release for the management of chronic lateral epicondylitis”

Tennis elbow (lateral epicondylitis), is a common occurrence in the general population, typically affecting individuals between the ages of 35 and 50. Although tennis elbow can present acutely, the onset is often gradual secondary to repetitive wrist and forearm movements. Symptoms include lateral elbow pain, forearm weakness, grip strength is typically diminished, and can greatly affect quality of life and functioning.

Treatment for this condition include both non-operative and operative options. Non-operative treatment includes: activity modification, nonsteroidal anti-inflammatory medications, physical therapy, counterforce bracing and corticosteroid injections. Operative treatment includes open, percutaneous, and arthroscopic techniques, including arthroscopic tennis elbow release (ATER). ATER has increased in popularity in recent years, however, there have been no high level of evidence studies evaluating its efficacy. Chronic lateral epicondylitis often does not respond to conservative (non-operative) treatment. ATER has been widely adopted approach to address this pathology in North America, however, no comparative studies have demonstrated its efficacy.

We aim to evaluate ATER and determine (1) whether is ATER better in terms of pain and function to non-operative management, (2) the treatment effect of ATER versus sham surgery in patients requiring debridement, (3) grip strength, (4) return-to-work time, and (5) adverse events between groups.

To accomplish this, we propose a multicentre, prospective, randomized controlled trial consisting of a sample size of 68 participants, comparing two groups: ATER (Group 1) and non-operative management i.e., sham surgery (Group 2). Groups will be stratified based on the need to debride the elbow.

In order to provide optimal care to patients and to justify the increased cost and utilization of resources required for this treatment, a high level of evidence study is essential.