



Oxford University Hospitals
NHS Foundation Trust

Tennis Elbow: Advice and Exercises

Information for patients



This booklet contains information, advice and exercises to help you with the management of your tennis elbow.

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What is tennis elbow?

Tennis elbow is a problem with the tendons around the elbow joint, known collectively as 'the common extensor tendon'. This tendon is part of the muscles that lift your hand backwards or up in the air. The tendons are involved in holding the wrist whilst you grip.

If you have tennis elbow, you will normally feel pain on the outside of your elbow. This area may be tender to touch. It may also be painful down into your forearm.

What causes it?

Tennis elbow is thought to occur due to repeated small changes to the tendon. This is often caused by overloading the tendon through doing heavy or repetitive manual work or activities.

People most often describe problems with gripping, writing and twisting movements of the forearm, as well as lifting, especially with the palm facing down.

Why does it develop?

Tennis elbow can occur at any age, although it most commonly occurs in people aged between 35 and 55. Up to four in ten people may experience it at some point in their life.

Most people who develop tennis elbow are not actually tennis players. It occurs more often in people who repeatedly use their hand for gripping activities, either at work or through sport. Sometimes there may not be an obvious cause.

Timeline

After 1 year eight out of ten people with tennis elbow will see an improvement in their symptoms, whether they have treatment or not.

Symptoms usually last for between 6 and 24 months.

How to manage tennis elbow

Ways to try to reduce the pain

Changing the way that you are doing things can help to avoid provoking your pain.

- Look at what activities cause you pain (your workstation or tools you may be using) and modify or avoid them, if possible. It is not harmful if you do continue with them, but they may cause you more pain.
- Do activities with your palm or thumbs facing upwards. **When gripping, carrying, holding or lifting you should not be able to see your knuckles.** This reduces the muscle activity pulling on the tendon. Using a 'thumb mouse' for computer work can help. Try to avoid gripping or have a loose grip if it is unavoidable.
- Keep your tools or workstation closer to your body, so you do not have to stretch too far and keep a more upright posture.
- Massage the area with an ice cube.
- Use anti-inflammatory, non-steroidal or 'cold' gels or creams rubbed into the painful area.
- Take painkillers (you may need to speak to your GP or pharmacist about which painkillers are suitable).
- Use a tennis elbow brace. You may find this is helpful to 'offload' the area and allow you to continue with normal activities. Braces can be purchased from internet suppliers or from some chemists.
- The brace does not have to be worn all the time; only when carrying out the activities that cause the pain. You may find wearing a wrist splint temporarily can also help.
- Stretches can also give relief from symptoms (see Stretching Exercises).

Do I need treatment?

There is no research evidence that shows any one treatment is ideal for all patients. However, an exercise programme can help to improve symptoms.

The following exercises are designed to improve your tendon strength, reduce your pain and improve your function.

A video with these exercises can be found on the British Shoulder and Elbow Society website at:

www.bess.ac.uk/tennis-elbow/¹

It can take up to 6 weeks to see any improvements. If you have had tennis elbow for only a few weeks, the following advice and exercises will help resolve your symptoms and lead to a quicker full recovery. If you have had symptoms for longer, you will still improve but it may take some months to fully resolve your symptoms. Tennis elbow will eventually settle.

If you have had a tennis elbow release, these exercises can also be used **from 4-6 weeks post-surgery** with guidance from your physiotherapist.

Assessment and treatment by a physiotherapist can give more specific individual advice. Your GP or the elbow surgical team can arrange this for you, if they think it might help.

¹The information at the link above was reviewed by the author of this leaflet in November 2022. Oxford University Hospitals NHS Foundation Trust is not responsible for the content or reliability of the website accessed via this link.

For many people exercises and stretches have been found to be as good as:

- **Dry needling or autologous blood injections or Platelet Rich Plasma (PRP) injections**

This involves using a needle or small amount of your own blood and inserting it into the tendon, to encourage blood flow to the area and promote healing. They can give short term benefit.

- **Steroid injections**

These can give short-term relief, but many studies have shown that pain and ability to use the forearm are worse after 1 year in those who have these injections. Repeated injections can also weaken the tendons and the ligaments.

- **Surgery**

Very few people need to have surgery for tennis elbow, and it would only be considered by your GP or surgeon after all other options have been explored and it is appropriate for you.

Remember: No one treatment has been found to give better results than any other.

Tennis elbow is a condition that improves by itself. Most people with this condition find that their symptoms have resolved within two years.

Exercise Notes

Try to exercise 4-5 days a week as this gives the muscles and tendons time to recover.

Start with low repetitions of each exercise and gradually increase the number over time.

For exercises using a load you could use half-filled bottles of water, small bags filled with rice, tin cans, or a hammer. Gradually increase the weight over time.

You may find the exercises make you sore, usually a different kind of discomfort than your usual pain, and it is because you are using your muscles in a different way.

Some mild discomfort during the exercises is to be expected, however you should not make your elbow become increasingly painful.

The exercises can be adapted by you every day according to your symptoms. It is important to consider the different elements of the exercise that can be altered.

- **LOAD** or the amount of weight. Less weight is easier on the tendon, and heavier weight is harder.
- **REPETITIONS.** Fewer repetitions initially increasing to more repetitions until the elbow becomes tired or fatigued.
- **FREQUENCY.** Alternate days, allowing for rest days in between.
- **POSITION and GRIP.** These are discussed for each exercise below.

Aim to progress each element one at a time. Occasionally you may need to complete easier exercises depending on your symptoms and the activities that you are doing on a daily basis. This is normal for any rehabilitation programme. Try to stay positive and focus on the progress that you have made over time such as a month, rather than comparing week to week findings.

Exercise 1: Isometric 'static exercise'

This exercise involves keeping the wrist and the fingers straight and resist movement with your opposite hand. Start with your elbow flexed to 90 degrees and tucked into your side. Thumb up and fingers straight.



Slowly apply pressure from the other hand over the knuckles on the back of the affected hand as is comfortable. Do not allow the affected hand to move against the pressure. Hold for a few seconds, relax and repeat.



If this is easy and does not provoke symptoms progress by pressing along the back of the fingers.



Progress by slowly extending your elbow forward as you apply the pressure.



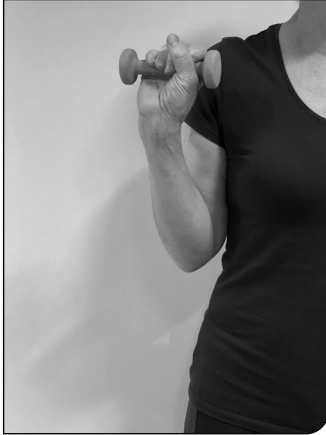
Once you have progressed through the exercises and they feel easy to do or for some this may be the starting point you can turn your palm to face the floor and restart the progressions. Start with pressure over the knuckles of the hand then to the base of the fingers and finally the fingertips.



Then extend the elbow forwards.

As you progress apply more resistance from the opposite hand.

Exercise 2: Elbow Flexion and Extension



In standing holding a weight, start with a low load or no load if your elbow is particularly sore. Start with your elbow bent so your knuckles on the back of your hand are close to your shoulder with the wrist bent back. Make sure your shoulder is relaxed and rolled back.





Slowly lower your forearm whilst also lowering your hand at the wrist. Continue until your elbow is fully straight and your wrist is flexed with your knuckles pointing backwards. Pause at the end.



Rotate your forearm so that the wrist is facing forwards.



Lift your forearm by bending at the elbow until it is fully bent.



Rotate your hand to the starting position and repeat slowly until your muscle feels tired.

Exercise 3: Forearm rotation strengthening

For this exercise you will need a long object with some weight to it such as a rolling pin or a hammer. When starting this exercise start in standing with your shoulders relaxed and rolled back not slouched. Hold your elbow tucked into your side bent at 90 degrees. Hold the end or middle of the hammer handle – so that the head is pointing to the ceiling. Start with a gentle grip trying not to aggravate your usual discomfort.



Keeping the elbow bent and close to your waist, slowly rotate the head of the hammer out to the side and back to the midline then the opposite way.

To make this exercise easier you could start by holding the bar in the centre, and then progress to holding it towards the end. You can then use a weighted bar, eg something with a weighted end such as a mallet.

To progress this exercise further you could do this exercise with a straight elbow.

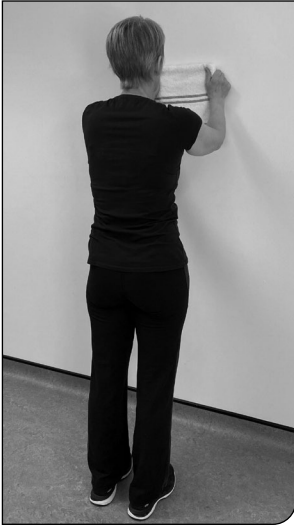


It is important that you keep your shoulder back and that when you rotate your arm you watch the crease in your elbow making sure that you are rotating from the elbow and not the shoulder.

This exercise can also be done with your arm out to the side.

Exercise 4: Wall slides

This exercise will help maintain mobility throughout your arm. You will need a towel.



Stand facing a wall with your hands on the towel slightly gripping it. Start close to and facing the wall so that your elbows are flexed.



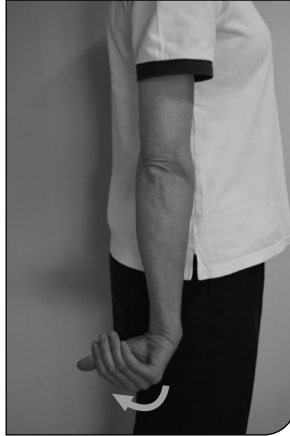
Slowly slide the towel up the wall straightening your elbows. As you straighten your elbows lift your heels to raise up on to your toes. This helps to use the muscles in your shoulders. Lower the hands and repeat.

To progress this exercise, add a small weight in each hand as you slide up the wall, and then progress to doing the same exercise without the wall.

Stretching exercises

These can be done at any time. Some people find them helpful after doing their exercises.

Stretching Exercise 1



1. With your arm at your side and your shoulder back, straighten your elbow and twist your arm inwards towards your body.
2. Bend your wrist and hand up. Keep the elbow straight.
3. Make a fist and keeping the wrist bent, keep twisting your arm, so the hand turns away from your buttock.
Keep your elbow straight. You should feel a stretch along your forearm.
4. Hold for 10-15 seconds.

Stretching Exercise 2



1. Put your arms by your sides.
2. Turn your affected arm so that the hand faces outwards.
3. Keeping both elbows straight, reach over with your unaffected arm to your affected arm.
4. Place your palms together and link your fingers, keeping your affected arm next to the side of your body.
5. Use your unaffected hand to lift the hand and bend the wrist of your affected arm. You should feel a stretch along your forearm.
6. Hold for 10-15 seconds.

How to contact us

If you have a query about exercises or movements, please contact the Physiotherapy department where you are having treatment.

Physiotherapy Reception

(Nuffield Orthopaedic Centre)

Windmill Road

Headington

Oxford OX3 7LD

Tel: **01865 738 074**

(9.00am to 4.30pm, Monday to Friday)

Physiotherapy Reception

(Horton General Hospital and Brackley Department)

Oxford Road

Banbury OX16 9AL

Tel: **01295 229 432**

(8.00am to 4.00pm, Monday to Friday)

Physiotherapy Reception

(John Radcliffe Trauma Service)

John Radcliffe Hospital

Headley Way

Oxford OX3 9DU

Tel: **01865 221 540**

(9.00am to 4.30pm, Monday to Friday)

Web links

Any other Physiotherapy Information leaflets

Find more leaflets and information on Physiotherapy here:

www.ouh.nhs.uk/physiotherapy/information/physiotherapy-leaflets.aspx

Find more leaflets and information on other shoulder and elbow conditions, surgical procedures and physiotherapy guidelines here:

www.ouh.nhs.uk/shoulderandelbow/information/patient-information.aspx

Further information

If you would like an interpreter, please speak to the department where you are being seen.

Please also tell them if you would like this information in another format, such as:

- Easy Read
- large print
- braille
- audio
- electronic
- another language.

We have tried to make the information in this leaflet meet your needs. If it does not meet your individual needs or situation, please speak to your healthcare team. They are happy to help.

Author: Nuffield Orthopaedic Centre Shoulder and Elbow Lead Physiotherapist
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Oxford University Hospitals NHS Foundation Trust
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