

PIR NEWSLETTER

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Elbow Woes

By: [Susan; PTA](#) ~ [Saugus Clinic](#)



Stan is an avid golfer who typically hits the links a few times a week during spring, summer and fall. This past spring, he started noticing a nagging pain on the inside of his elbow when he teed off. First, it was just a slight, dull ache, with an occasional sharp, shooting pain that radiated into his forearm and wrist. Then, Stan noticed the pain was progressively worsening as the golf season continued into the fall, to the point where he could no longer swing a club effectively. But he was also having difficulty lifting packages, grooming and eating due to the pain and weakness, and he noticed increased pain and stiffness at night and in the mornings.

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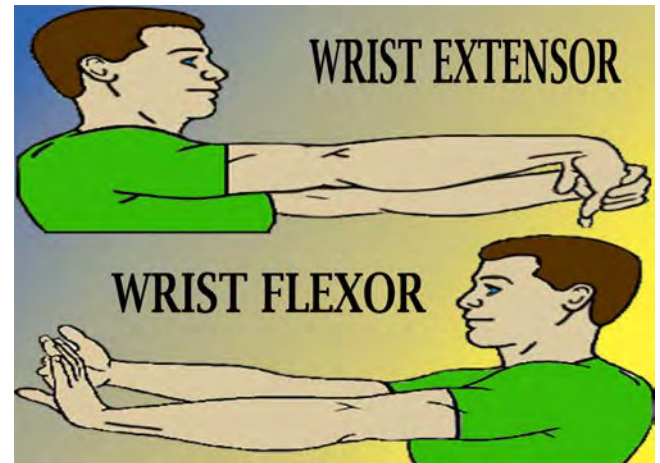
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Spotlight Exercise:

Wrist Flexor & Wrist Extensor



Wrist Flexor Stretch:

1. Straighten elbow completely.
2. With palm facing up, grasp the middle of hand and thumb.
3. Pull wrist down until mild stretch is felt.
4. Hold for 30 seconds.
5. Release and repeat 3 times.
6. Perform exercises two times each day.

Wrist Extensor Stretch:

1. Straighten elbow completely.
2. With palm facing down, grasp the back of the hand.
3. Pull wrist down until mild stretch is felt.
4. Hold for 30 seconds.
5. Release and repeat 3 times.
6. Perform exercises two times each day.

Reference: [Tennis Elbow Exercises; Michael Kent, MD](#)

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Dave was an avid tennis player who loved to play outdoors in seasonable weather, but moved indoors to continue playing throughout the year. In the spring, he started noticing a slight, dull ache on the outside of his elbow. It would be OK during a match, but he noticed some pain with his backhand swing that occasionally would be sharp and shooting, radiating into his forearm and wrist. As the tennis season wore on, Dave began having difficulty with his backhand, his serves, and eventually was unable to play at all due to the pain. He also noticed that his elbow stiffened up later in the day and his sleep was interrupted as well. He was having difficulty with the simplest of tasks, like lifting a gallon of milk or opening a jar.

What do Stan and Dave have in common? Both are suffering from **Epicondylitis**: an inflammation of the tendons in the elbow caused by overuse or trauma. In Stan's case, it is Medial Epicondylitis, or "*Golfer's Elbow*", meaning that the tendons on the inside of his elbow have become inflamed, with surrounding swelling putting pressure on the nerves, which caused the radiating pain into his hand. Dave is suffering from the same condition, but in his case, it is Lateral Epicondylitis, more commonly known as "*Tennis Elbow*". Also the result of overuse or injury, the tendons, which connect the muscles to the bones have become inflamed and tight, with surrounding swelling putting pressure on the nerves radiating down the outside of the elbow into the forearm.

So, what can be done to help Stan and Dave get back to the games they love? First of all, **REST** is required to help the injured tissues begin to heal.

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In each case, the continued use of the elbow without any rest contributed to the ongoing and worsening pain and suffering for Stan and Dave. Each of them needs to take a break from the sport they love to allow plenty of healing time. Secondly, **ICE** is necessary to bring down the swelling and reducing the pain symptoms. **ANTI-INFLAMMATORY MEDICATIONS** can also provide relief, not just from the pain, but with the swelling and inflammation of the tendons. **STRETCHING** the tendons that are stiff and tight will also help in the healing process and will increase the extensibility, allowing increased motion in the elbows and wrists.

Physical Therapy can help too! With a variety of modalities, deep tendon massage, and instructing Stan and Dave in proper stretches and exercises, the therapists can help them achieve their ultimate goal of recovery and returning to their respective sports! If you suffer from Tennis or Golfer's Elbow, contact your nearest Partners In Rehab, PT clinic to schedule an evaluation or talk with one of our Physical Therapists.

At Partners In Rehab, PT we offer a wide array of Physical Therapy treatments and specialized programs that are tailored to meet the needs of each individual. Here you will receive motivation, ongoing support, and superb clinical expertise from the best team of Physical Therapists in New England. Visit us online at www.partnersinrehab.com for more info about our clinic, get to know our staff, read our quarterly newsletter, or register for care. At Partners In Rehab, PT we're here to help you **HEAL BETTER. MOVE BETTER. FEEL BETTER.**

Physical Therapy vs Opioids:

When to Choose Physical Therapy for Pain Management

According to the Centers for Disease Control and Prevention (CDC), sales of prescription opioids have quadrupled in the United States, even though "there has not been an overall change in the amount of pain that Americans report."

In response to a growing opioid epidemic, the CDC released opioid prescription guidelines in March 2016. The guidelines recognize that prescription opioids are appropriate in certain cases, including cancer treatment, palliative care, and end-of-life care, and also in certain acute care situations, if properly dosed.

But for other pain management, the CDC recommends non-opioid approaches including physical therapy.

Patients should choose physical therapy when:

1) The risks of opioid use outweigh the rewards.

Potential side effects of opioids include depression, overdose, and addiction, plus withdrawal symptoms when stopping opioid use. Because of these risks, "experts agreed that opioids should not be considered first line or routine therapy for chronic pain," the CDC guidelines state. Even in cases when evidence on the long-term benefits of non-opioid therapies is limited, "risks are much lower" with non-opioid treatment plans.

2) Pain or function problems are related to low back pain, hip or knee osteoarthritis, or fibromyalgia.

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PIR 2017 Patient Testimonials

At Partners In Rehab, PT we value our patients feedback and appreciate hearing how they feel about the services they received at one of our 3 facilities. Over the past year we have received some of the best patient testimonials, praising the services they received here at PIR, so we wanted to share a few of them with you:

"The staff was very professional and directed every procedure with care. If additional treatment is needed, I will definitely come back to Partners In Rehab. I feel that I have had so much improvement and I will highly recommend PIR."

-Jacqueline S., Methuen Clinic

"Partners In Rehab, PT is perfect! They were attentive, understanding, & empathetic Physical Therapists. I can't recommend the Saugus team enough! When I first arrived, I barely had any range of motion in my ankle. Today I'm walking with a lot more confidence. Thank You!"

-Margaret D., Saugus Clinic

"I'm amazed at the progress I've made in both of my knees. All of the therapists demonstrated considerable knowledge, care, & compassion. I highly recommend Partners In Rehab, PT to family & friends. I felt stronger every week and gained back my confidence."

-Beth M., Georgetown Clinic

If you have been a patient of Partners In Rehab, PT and would like to share your thoughts about the treatment you received, then please visit our website at www.partnersinrehab.com and click on the **Patient Survey** tab on the home page. At Partners In Rehab, PT we are dedicated to helping our patients **HEAL BETTER. MOVE BETTER. FEEL BETTER.** & by sharing your feedback we can guarantee to continue doing so for many more years. - *Thank You*

The CDC cites "high-quality evidence" supporting exercise as part of a physical therapy treatment plan for those familiar conditions.

3) Opioids are prescribed for pain.

Even in situations when opioids are prescribed, the CDC recommends that patients should receive "the lowest effective dosage," and opioids "should be combined" with non-opioid therapies, such as physical therapy.

4) Pain lasts 90 days.

At this point, the pain is considered "chronic," and the risks for continued opioid use increase. An estimated 116 million Americans have chronic pain each year. The CDC guidelines note that non-opioid therapies are "preferred" for chronic pain and that "clinicians should consider opioid therapy only if expected benefits for both pain and function are anticipated to outweigh risks to the patient." Before you agree to a prescription for opioids, consult with a physical therapist to discuss options for non-opioid treatment.

"Given the substantial evidence gaps on opioids, uncertain benefits of long-term use and potential for serious harm, patient education and discussion before starting opioid therapy are critical so that patient preferences and values can be understood and used to inform clinical decisions," the CDC states. Physical therapists can play a valuable role in the patient education process, including setting realistic expectations for recovery with or without opioids.

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