

CLINICAL CASE REPORT

Treatment of a Fifty-five-year-old Female with Lateral Epicondylitis

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Patient History

A 55-year-old female with persistent symptoms for 3 years had undergone extensive conservative treatment that included activity modification, nonsteroidal anti-inflammatory drugs (NSAIDs), elbow straps, and three to four steroid injections.

Treatment

The patient consented to an ultrasound-guided tenotomy treatment using the TenJet™ device instead of open or arthroscopic surgery. After identifying the defect on ultrasound, the pathology was accessed using a minimally invasive 3 mm stab incision. The TenJet device was advanced through the tendon sheath to the hypoechoic area and the intra-tendinous calcifications. Using the foot pedal, the system was activated and under continuous ultrasound guidance, the procedure was performed for 4 minutes at setting 8 until a uniform isoechoic appearance was observed.

Follow Up

The patient was instructed to start physical therapy with eccentric loading after the 2-week follow-up visit for a period of 4 weeks.

Visual Analog Scale (VAS) pain scores improved from 5 (baseline) to 2 at 2 weeks, and 0 at 6 weeks. The patient remained pain-free at 6 months.

Patient Reported Elbow Evaluation (PREE) function scores improved by 43% at 2 weeks, 99% at 6 weeks, and 100% at 6 months.

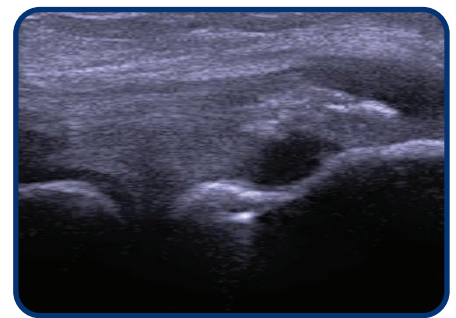


Figure 1.
Pre-procedure diagnostic ultrasound imaging shows an extensive area of tendon with calcifications and necrotic tissue.

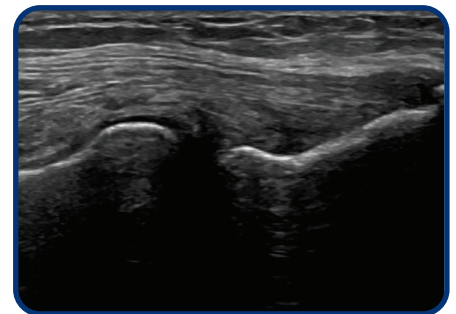


Figure 2.
Six-month follow-up ultrasound shows complete resolution of the calcific debris, with reduced hypoechoic appearance.