

## Tennis Anyone?

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Wait! I know what you're thinking, "Tennis, what does this have to do with muscular development?!" But before you skip this article, "Tennis elbow", affects us all at one time or another. Please don't ask me why they call it this, it's not like tennis players invented this injury. As a matter of fact, more weight lifters complain about this ailment than any other athlete.

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"Tennis elbow" is a painful condition of the "outside point" of the elbow that typically involves inflammation and irritation of the extensor tendons where they attach to the lateral epicondyle. It's that "searing pain" you get on your elbow when you pick up a dumbbell to do lateral raises. You know, the one that causes you to nearly drop the weight on your foot. Some people notice it when they try to shake hands with someone or when they wrap their hand around a dumbbell or barbell. That pain will immediately stop your training and remind you that there's a problem.

Exercise, whether lifting weights or playing tennis, is absolutely essential to good health. Day in and day out, we push ourselves in the gym to improve. With this "repetitive trauma" comes micro trauma which is essentially tiny little tears in the muscles and tendons. Some experts say these "micro tears" are necessary for growth and hypertrophy (I agree), but sometimes these tears are accompanied by severe inflammation which results in the body forming adhesions or scar tissue. In this situation, the muscles lose their normal texture and movement. These physical dysfunctions can then lead to pain.

Most of the athletes that come to my office with these injuries have had them for a while. They've tried to remedy them with ice therapy and perhaps some rehabilitative forearm exercises with little to no success. Many others seek cortisone shots which will ease the pain in some cases; however, in most individuals, the pain returns in six to eight weeks. Some athletes have told me that they've tried forearm strengthening exercises but, in most cases, these have done nothing but make the situation worse. It's common knowledge that attempts to stretch or strengthen muscles that are currently bound up by adhesions are rarely successful. That's because only the muscles above and below the restrictions are affected. The actual restricted area remains unaffected, causing further muscle imbalances and stress that results in the formation of yet more restrictive tissues.

### Active Release Can Fix It Fast

Most elbow cases that come into our offices are resolved in 7-8 visits using Active Release Techniques (A.R.T.) to determine which tissues are affected. Tissues involved usually include the deep annular ligament, the supinator and ancoreus muscles, and the superficial structures of the forearm extensor muscles. These muscles are stressed when we stabilize our wrist in the bench press, or turn our palms up in a bicep curl. Many exercises affect these muscles and that's why "tennis elbow" is so common among weight lifters.

Specific A.R.T procedures are used to treat each layer of the injury. Once these areas are found and treated, the tissues will once again move smoothly over each other without causing tension to the attachment on the outside of the elbow. Immediately following the 1st or 2nd treatment, the patient experiences a decrease in pain and an increase in range of motion and strength.

Some simple stretches and strengthening exercises are taught to the patient for use after the treatments to ensure the problem doesn't return. Next time you feel that "burning" pain going through the outside of your elbow, don't waste time! Find yourself an Active Release Techniques provider to remedy the situation, quickly. He or she will have you back in the gym in no time. Have a great workout!