

Orthopaedic Connection

Arthritis of the Elbow

By Thomas J. Haverbush, M.D.
Orthopaedic Surgeon

Transforming patient information into patient understanding.

What if every time you moved your elbow you had pain? How many times a day do you bend your elbow? Hundreds.

Every time you eat, drink, write, type – pain is always there. You may (or may not) have arthritis of the elbow. For many of my patients this painful situation has taken over and they are worried.

Every pain in the elbow fortunately is not arthritis.

Cause

The cause of arthritis of the elbow is not the same as most of the arthritis I see in other joints.

- Rheumatoid arthritis is the most common type of arthritis in the elbow. RA is a disease of the lining of the elbow joint; the synovial lining. It destroys the bone and soft tissue. It affects both elbows and many other joints as a rule.
- Osteoarthritis affects the elbow far less than the other joints such as the knee and the hip. The cartilage cushion on the ends of the bones becomes rough. The bones begin to rub against each other. Loose pieces appear in the joint.
- Trauma or injury to the elbow can damage the cartilage or joint surface. Think of this the next time you are watching a baseball game! Pitchers pay a very high price for what they do. This eventually leads to the development of post traumatic arthritis.

Signs and Symptoms

- Pain primarily on the outer (lateral) side of the joint that becomes worse as you rotate the forearm.
- Pain that occurs at night or when you are at rest indicates a more advanced stage of arthritis.
- Swelling, which particularly occurs in RA.
- Can't do daily activities because the elbow joint is unstable and gives way.
- Decreased ability to bend or straighten the elbow.
- Catching or locking of the elbow.
- General “feeling” of stiffness.
- Involvement of both elbows or pain also in wrists or shoulders indicates RA.

How I Diagnose Elbow Arthritis

Well, it starts with exam of the elbow for swelling, tenderness and range of movement. But the exam is not limited to the elbow because it should include the shoulder, wrist and hand.

Plain x-rays alone often give me enough information about the joint. These x-rays show arthritis changes as well as loose pieces of bone (bone chips) and calcium in and around the joint. Arthritis changes typically show the joint space to be narrowed and bone spurs may have appeared on the edges of the joint.

It is actually somewhat unusual to need further imaging studies such as MRI.

MRIs are so commonly ordered nowadays that some of my patients are suspicious that they did not have a thorough exam if they didn't get an MRI.

Nothing could be further from the truth. Many doctors will actually order an MRI instead of plain x-rays of the elbow. That is sad because most of the time I don't need the MRI to diagnose elbow arthritis.

More To Come

We have a lot more to cover so this will be a good place to stop for this week. Please come back next week for Part 2 which will include surgical and non surgical treatment. See you then.

My patients put their trust in me and what I do improves the quality of their lives.

Office Website and Gratiot County Herald Archive

Attention! If my loyal readers want to be as smart as a tree full of owls they will fly to www.orthopodsurgeon.com for tons of musculoskeletal information everyone can use.

You get the Office Website and Library, Your Orthopaedic Connection and GCH archive of every article I have written for you.

Good health. Good life. All the best to you.

Be well.

Dr. Haverbush