**ESWT Treatment for Chronic Lateral Epicondylitis Study Recap**

The protocol that we are now using for CLE is a high-energy one-session treatment protocol. The protocol that we are using is from a just recently published article in the American Journal of Orthopedics written by John Furia MD. Dr. Furia is an orthopedic Sports Medicine Specialist. The Dornier Epos Ultra the equipment used. We now have a reference for CLE treatments from an American published journal.

Dr. Furia served as the team physician at the amateur and professional level since 1990. He has served as the team physician for: Bucknell and Rochester Universities, Houston Oilers, Houston Astros, Houston Rockets, Rochester Americans (AHL Hockey), US Amateur Boxing and at the high school level with Westbury and Greece-Olympia’s football teams.

The Roles Maudsley results at the 12-week follow up were 78%. This is much better then the 62% for plantar fascia at the 12-week follow-up. Remember that the nature of healing tendons/plantar fascia is getting better with time. Expect better results at the six-month and one year follow for CLE, as is the case with plantar fasciosis.

It can take up to 4 weeks for improvement with CLE after High Energy ESWT Treatment. Patients need to avoid gripping and torque/twisting tasks for three weeks. In Dr. Furia’s report all work compensation patients returned to work in one week. Return to sports was allowed as the symptoms were reduced. Patients were allowed to return to work and sports, as they felt better.

**Average VAS scores were the following**

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<tbody>
<tr>
<td>Pre- Treatment</td>
<td>8.0</td>
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<tr>
<td>ESWT/4 weeks</td>
<td>4.0</td>
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<tr>
<td>ESWT 12 weeks</td>
<td>2.5</td>
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**Roles Maudsley Scale**

4 weeks
- Excellent/Good: 69.5 %
- Fair 19.4 %
- Poor 11.1 % (note poor means there was no change. There were no patients made worse off in this study.)

12 weeks.
- Excellent/ Good 78%
- Fair 11.1%
- Poor 11.1 %

Note that patients moved from fair into excellent/good or improved from week six to week twelve. There was a shift of almost 10% from the fair into to the good/excellent group. The poor remained the same.

There was no second treatment offered during this study.

We know that additional treatment was beneficial from our own ESWT Plantar fasciitis treatments. If a patient is doing fair or poor at the 12-week mark and not getting better a second treatment should be considered.

**Interesting facts**

- 50% of all tennis players will have CLE
- 16% of all work compensation cases are CLE
  - In this study the return to work from a workman’s comp case was one week. This is dramatically different then if surgery was used
  - Pain reduction continued to improve from week six to week twelve which falls into the classic tendonopathies healing pattern