

Tennis Elbow Responds to Isokinetic Training

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For individuals with chronic tennis elbow, rehabilitation based on isokinetic eccentric exercises appears to produce better results than conventional rehabilitation after about 9 weeks, according to a recent study.

Dr. Jean-Louis Croisier and his colleagues at the University of Liege (Belgium) treated 92 patients with unilateral

chronic lateral epicondylar tendinopathy who had symptoms for an average of 8 months that did not respond to conservative nonstrengthening treatments.

The 46 individuals who received strengthening-based isokinetic eccentric training with a dynamometer had significantly greater reductions in pain and reported disability than did 46 matched individuals who resumed conventional nonstrengthening rehabilitation measures (Br. J. Sports Med. 2007;41:269-75).

At the end of treatment, average pain scores with eccentric training and control rehabilitation were 1.2 ± 0.9 and 4.3 ± 1.6 , respectively (0 = no pain, 10 = most severe pain). Average values on the disability questionnaire were 14.4 ± 4.6 and 10.2 ± 3.8 , respectively (0 = most disability, 20 = no disability).

The patients receiving eccentric training also achieved average peak torques that were similar on the affected and unaffected sides, whereas peak torque was

significantly reduced in the injured side in the control group.

Outcomes as measured by ultrasonography were also significantly better with eccentric training. By the end of treatment, 48% of patients treated with eccentric training had normalization of the tendon diameter, compared with 28% of those in the control group. Moreover, patients in the control group were more than three times as likely to have no improvement in their echographic image. ■

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References: 1. Silberstein SD, Neto W, Schmitt J, Jacobs D, for the MIGR-001 Study Group. Topiramate in migraine prevention: results of a large controlled trial. *Arch Neurol.* 2004;61:490-495. 2. Brandes JL, Saper JR, Diamond M, et al, for the MIGR-002 Study Group. Topiramate for migraine prevention: a randomized controlled trial. *JAMA.* 2004;291:965-973.