

EPITROCHLEITIS (GOLFER'S ELBOW)



♦ INTRODUCTION

If you are reading this guide, you are probably experiencing pain on the inner side of your elbow that is limiting your daily activities, work, or training.

The first thing we want to tell you is this:

👉 **you are not alone, and this is a very common condition.**

Epitrochleitis, also known as golfer's elbow, is a common problem that can affect anyone, even people who do not practice sports.

Although it can sometimes be frustrating and persistent, in most cases it is not a serious injury, but rather a sign that the tendon needs the right type of stimulus to recover.

This guide has been created to help you begin a simple, specific, and safe physiotherapy process.

♦ UNDERSTANDING THE PROBLEM

Epitrochleitis is mainly related to an overload of the wrist and finger flexor tendons, located on the inner side of the elbow.

These tendons are constantly involved in:

- gripping objects
- repetitive movements
- manual and sports activities

When the load exceeds the tendon's capacity, the body may respond with:

- pain
- weakness
- discomfort during movement

👉 This does not mean the tendon is damaged, but rather irritated and in need of gradual reloading.

♦ IMPORTANT CONCEPT

One of the most common mistakes is:

- ✗ stopping completely
- ✗ or continuing while ignoring the pain

👉 The correct approach is:

- controlled loading
- gradual progression
- specific exercises

👉 This is what allows the tendon to adapt and improve over time.

♦ HOW TO USE THIS PROGRAM

👉 This is not a set of random exercises.

It is a physiotherapy-based protocol designed to:

- reduce pain
- improve tendon capacity
- restore strength and control

Perform the exercises calmly, without forcing, always maintaining control of the movement.

EXERCISES

♦ FREQUENCY

- 2–3 times per week
 - slow and controlled execution
 - consistency is key 
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♦ WHAT YOU MAY FEEL

During the exercises or a few hours afterward, you may notice:

- mild discomfort
- a feeling of tension

 This is normal and part of the recovery process.

 Avoid excessive or sharp pain during the exercises.

♦ WHAT TO EXPECT

Improvement is not immediate.

It requires:

- time
- repetition
- progression

 With consistency, in most cases, pain will gradually improve 

1 FINGER FLEXION WITH A SOFT BALL



Position:

Sit comfortably with your elbow extended and supported, keeping your hand relaxed around a soft ball.

Execution:

Hold a soft ball with your hand and fingertips.

Slowly close your hand and fingers until you feel mild discomfort, then return in a controlled manner.

Sets:

2–3 sets of 12–15 repetitions

Why this exercise is important:

This exercise activates the superficial and deep finger flexor muscles, which are commonly involved in epitrochleitis.

It helps distribute the load more evenly across the forearm and reduce stress on the tendon.

2 ISOMETRIC WRIST AND FINGER FLEXION



Position:

Keep your elbow fully extended, with your forearm supported and a light resistance (such as an elastic band or weight) placed around your fingers.

Execution:

From this position, slowly flex your wrist and fingers against the resistance until you feel mild discomfort.

Hold the position isometrically for 30–45 seconds.

👉 Over time, you should notice that the pain decreases or the movement becomes less uncomfortable.

Sets:

3–5 sets of 30–45 seconds

Why this exercise is important:

This exercise helps reduce pain while safely activating the tendon through an isometric contraction.

It is ideal during the early stages without creating excessive overload.

3 SLOW LOADED WRIST FLEXION



Position:

Rest your forearm on a surface, with your hand hanging off the edge while holding a light weight.

Execution:

Flex your wrist upward in 2–3 seconds, then slowly lower it over 5 seconds.

Sets:

2–3 sets of 10–12 repetitions

👉 If the weight feels too light, slightly increase the load.

Why this exercise is important:

The eccentric phase (the lowering movement) is essential for tendon adaptation, recovery, and regeneration.

It improves strength and increases the tendon's ability to tolerate load over time.

4 FOREARM PRONATION WITH ELBOW EXTENDED



Position:

Extend your arm in front of you, keeping your elbow fully straight and your palm facing upward.

Execution:

Hold a light object (such as a dumbbell or hammer) and slowly rotate your forearm, bringing your palm downward (pronation), then slowly return to the starting position.

Sets:

2–3 sets of 10–12 repetitions

Why this exercise is important:

Keeping the elbow extended increases the functional load on the forearm.

It improves control and stability during daily movements while also stimulating adaptation and improving the strength of the forearm pronator muscles, which may also be involved in epitrochleitis.

5 FLEXOR STRETCH (FINAL)



Position:

Extend your arm in front of you.

Execution:

With your other hand, pull your wrist and fingers upward and toward you until you feel tension in the lower part of your forearm.

Hold the position for 20–30 seconds.

Sets:

6–9 repetitions

Why this exercise is important:

It helps reduce muscle tension and improve mobility after the exercises.

◆ FINAL MESSAGE

If you have made it this far, you have already taken an important step:

👉 you are starting to actively take care of your condition.

Remember:

- there is no need to rush
- there is no need to force
- the body adapts over time

👉 In most cases, with the right approach, improvement will come.

Consistency and correct execution are key to achieving results.

If you do not notice improvement after approximately one month, it may be useful to perform a more in-depth evaluation to rule out other tendon-related conditions.

In some cases, additional treatments such as shockwave therapy may be recommended.

👉 In this case, we recommend consulting a specialist or physiotherapist for a proper evaluation.

◆ SUPPORT

If you have any questions or need support:

✉ support@physiocarehub.eu

👉 You do not have to go through this alone.
We are here to help you.

Antonio

