Abstract

Treatment

The Tenex procedure was performed under the guidance and assistance of ultrasonography. Ultrasound allowed the clinician to perform the procedure accurately viewing the tenotomy that is taking place under the skin in real time. This allows the clinician to perform the procedure in a safe and controlled manner. The imaging allows for a real-time assessment of the clinical decision making and inserted at an appropriate speed to reach the site of damaged tendon. Viewable under the ultrasound probe, ultrasound allowed the clinician to perform the procedure accurately viewing the tenotomy that is taking place under the skin in real time. This allows the clinician to perform the procedure in a safe and controlled manner.

The Tenex ultrasonic percutaneous tenotomy of lateral epicondylitis has been proven to relieve symptoms when conservative treatment fails within 12 to 24 months with conservative treatment, the Tenex procedure has been proven to heal patients with this chronic condition. About 10% to 15% of the patients experiencing the symptoms of chronic elbow tendinopathy will not obtain results from conservative treatments and therefore will be surgical candidates (Barnes, Beckley, & Smith, 2015).

Results

The Tenex procedure is a popular and has shown to have increased signal density indicating edema and degeneration at ECRL insertion Sites. The procedure has proven to be effective in cases of recalcitrant lateral elbow tendinopathy and has been proven to be effective in cases of recalcitrant lateral elbow tendinopathy.

Discussion and Summary

In conclusion, the TX1 procedure has demonstrated over multiple times success in treating lateral epicondylitis or tennis elbow. Clinicians will not recommend this option unless the condition remains chronic and the conservative treatments fail. Ultrasonic percutaneous tenotomy for lateral epicondylitis is a relatively new and minimally invasive treatment option that can be used after conservative treatment has failed. Tenotomy of extensor origin under local anesthesia following the unsuccessful use of conservative intervention, Tenex can be a faster road to recovery for athletes getting them back into their sport. Even though this procedure's outcome does correlate with other case studies, this study focused on one patient, so the outcome and results should be considered.

References


Barnes, D. E., Beckley, K. R., & Smith, R. J. (2015). “The TX1 technique is a novel sonographically guided percutaneous tenotomy technique that uses ultrasonic energy to produce low-amplitude, high-frequency longitudinal oscillations of an 18-gauge tip needle.” Following the Tenex procedure, the patient underwent 6 weeks of rehabilitation. Patient returned to ADL’s without any complaints. Uniqueness: Lateral epicondylitis is a common injury in the general population. Research suggests up to 3% of the population develops epicondylitis lasting 12 to 24 months in duration. The average age to develop lateral epicondylitis is 30 to 40 years. The most common mechanism for this injury is tennis. It has recently been seen less in tennis players possibly due to the changes in the tennis racket and the strings tension.

The procedure has been proven to be effective in cases of chronic elbow tendinopathy. About 10% to 15% of the patients experiencing the symptoms of chronic elbow tendinopathy will not obtain results from conservative treatments and therefore will be surgical candidates (Barnes, Beckley, & Smith, 2015).