

# Elbow Bursitis

When you rub your elbow, you can feel the hard bones of your forearm. What you can't feel is the olecranon (oh-LEK-ra-non) bursa, a slippery sac between the loose skin of the elbow and the bones of your forearm.

Normally, the bursa acts as a cushion between the skin and the bone. But if the elbow is hit, or if you put constant pressure against the tip of the elbow (as when you lean on a desk or other hard surface), the bursa can become inflamed and irritated, a condition called bursitis. The bursa begins to swell, and may create a lump over the tip of the elbow.

## Signs and symptoms

- Gradual swelling indicates a chronic or long-lasting condition.
- Sudden swelling indicates a traumatic injury or an infection in the elbow.
- If the elbow was injured, the skin may be scraped or cut.
- Red, hot skin may indicate an infection.
- Pain and tenderness is variable.
- Motion may be limited if there was a traumatic injury to the elbow.

## Treatment

Generally, RICE is the first line of treatment for bursitis. If you notice that your elbow is sore or gradually beginning to swell, follow these guidelines:

- Rest: Take a break from whatever activity is causing the elbow to swell or become painful.
- Ice: Apply ice packs for short periods of time (15 to 20 minutes, three or four times a day).
- Compression: Wrap an elastic bandage around the elbow to keep swelling down.
- Elevation: Elevate the elbow above the level of your heart.

However, if the bursitis swelling comes on suddenly or if you experienced a direct blow to the elbow, see your orthopaedist. You may need X-rays to rule out the possibility of a fracture.

Your doctor may recommend aspirating, or draining, the bursa. This is an outpatient procedure that can be done in the doctor's office. The fluid from the bursa is removed with a syringe. An anti-inflammatory medication such as ibuprofen can help reduce pain and swelling. An elbow protector or padding can help reduce the risk of further injury.

Another treatment that may be used is an injection of a corticosteroid, a powerful anti-inflammatory drug. A final option is surgery to remove the bursa.

August 2000

