

## Patient Information Sheet

### Elbow Debridement for Stiffness (Lateral Column Procedure)

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#### What's the Problem?

The elbow joint works as a hinge and rotator of the forearm. As a joint, it often stiffens after a traumatic incident, which leads to a restriction in its range of motion. In some instances, this stiffening may also be associated with some wear and tear of the cartilage of the joint – osteoarthritis. Together, these can result in difficulty using the arm, particularly in activities like reaching the mouth to eat or brush your teeth, where lots of elbow flexion is required.



#### How can you treat it?

In some instances, non-surgical treatment is appropriate. This includes:

- Taking pain relief
- Steroid injections
- Physio to mobilise the elbow and surrounding muscles/tendons

Ultimately, surgery is only reserved for patients whose symptoms do not resolve with non-operative measures.

#### The Operation:

A lateral column procedure involves an incision along the outside half of the elbow. The stiffened tissues are separated and any excessive scar tissue is removed. The capsule of the elbow joint is also released, which is often the greatest contributor to overall stiffness. Finally, within the joint itself, any bits of arthritic bone that are causing impingement may be removed.

Elbow stiffness can often go hand in hand with compression of the ulna nerve on the inside half of the elbow – this controls sensation to the little finger side of the hand, as well as most of the fine motor movements of the hand. If you have symptoms of ulna nerve compression, this can be released in the same operation.

## **The Anaesthetic:**

You will be asleep for the duration of the operation (ie a general anaesthetic). The anaesthetist may talk to you about a nerve block before the operation, which helps with pain relief and generally lasts 24-48 hours. Alternatively, Mr Lau can put local anaesthetic into the wound whilst you are asleep, which can also help reduce pain.

## **What are the Risks of this Operation?**

- **Infection:**  
Usually only a superficial wound infection to the top-most layer of the skin. In rarer cases a deep infection can develop and this is a serious complication that may require further surgery. Rare but serious, ~1%.
- **Stiffness and ongoing pain:**  
It is common to have some residual stiffness for a few months after the operation and in some cases the elbow may not be able to straighten fully. This is because your elbow tends to stiffen again with fibrous or scar tissue after surgery, which is partly how it became stiff in the first place. Physio will help with improving movement, but some elbow rehabilitation will be required. As a general rule, whatever range of motion you have pre surgery, in the long term you should expect about a 50% improvement.
- **Damage to the nerves and blood vessels around the elbow.**  
Rare but serious, <1%

## **Benefits:**

If Mr Lau recommends an elbow debridement and a lateral column procedure, it is because he feels you will have a better outcome with surgery. In particular, your elbow will be more pain free, and have greater functional range of motion than if treated non surgically. As a general rule, whatever range of motion you have pre surgery, in the long term you should expect about a 50% improvement.

## **What can I expect?**

You will wake up with your arm in a sling after your surgery. If you have had a nerve block, you shouldn't feel any pain till the next day. The nurses will provide you pain relief and a physio will see you to go through some exercises you can do to mobilise the fingers, elbow and wrist to prevent excessive stiffness in these joints. These exercises will change over the next few weeks to months but you should try to do them regularly to maximise your rehabilitation. There are generally no restrictions to lifting or range of motion about the elbow after this operation and a sling need only be used for your comfort.

Most patients feel comfortable to go home the same day as surgery, although if you are too sore, an overnight stay is easily arranged. An appointment will be made for you for a wound check at 2 weeks. At this time, the dressings will be removed and you should just need to be in a sling for comfort. Another appointment with Mr Lau will be at 6 weeks with repeat XRs

## **What should I avoid doing?**

- In the first 2 weeks:  
Keep your wound dry. Try to mobilise your fingers, elbow and wrist as much as possible
- Between 2 and 6 weeks:  
Your arm will be in a sling, which you can gradually use less and less. There are no restrictions to bending or lifting the elbow

## **Return to...?**

- **Work**  
Depends what you do. Desk based work can be done from 2 weeks post operatively, if you can do these tasks single handedly. Otherwise generally 6 weeks before you can use both hands freely whilst seated.
- **Drive**  
In Australia, you can't drive unless you are in full control of both your arms. Therefore, whilst you're in a sling, you cannot drive. Generally 6 weeks post operatively.
- **Sports/Hobbies:**
  - Gentle swimming: after 6 weeks
  - Gardening (light tasks only): 6 weeks
  - Bowls: after 6 weeks
  - Golf, tennis, badminton, squash: after 3 months
  - Weights: commence after 6 weeks

## **Concerns or Questions?**

If you have any concerns post operatively, or you would like further information, please contact Mr Lau through the VBJS on 03 5752 5020 or via email at [admin@vbjs.com.au](mailto:admin@vbjs.com.au)