

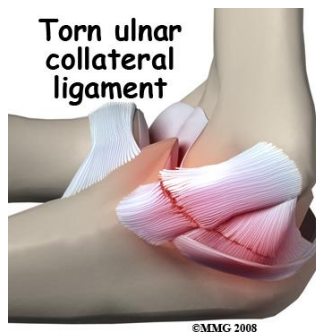


---

## *Elbow UCL injury*

### **What is an injury to the elbow UCL?**

The UCL (Ulnar Collateral Ligament) is a ligament on the inside of the elbow that stabilizes and supports the elbow. It is prone to acute injuries when a person falls on the elbow with an outstretched hand. It is also injured with chronic repeated stress with overhead throwing, such as baseball pitchers. The ligament can partially tear or completely rupture. It is often misdiagnosed as “golfer’s elbow” or tendonitis of the inner elbow. Unfortunately, many UCL injuries take many weeks and months to recover and may require prolonged rest from sports.



### **How is it diagnosed?**

UCL injuries are diagnosed by clinical exam in combination with imaging. Ultrasound and MRI are commonly used to confirm UCL injuries.

### **Partial tears:**

- Rest from throwing – most important step! May need to rest from throwing for > 3 months
- NSAIDs – Ibuprofen, Advil, Naprosyn, topical Diclofenac (Voltaren) gel
- Ice, modified rest
- Elbow hinged brace or sleeve
- Physical Therapy – to ↓ pain & strengthen the muscles around the elbow. Can take 3-6 months of rehab
- Orthobiologic injections – Prolotherapy or Platelet Rich Plasma (PRP) injections – most successful for low-grade or intermediate tears

### **High-grade or Complete tears:**

- Orthobiologic injections – Prolotherapy or Platelet Rich Plasma (PRP) injections – less successful for high-grade tears
- Surgery – “Tommy John” reconstructive surgery is often recommended for more severe tears and in athletes. Return to sport often takes 9-12 months