

## **Case Presentation for Supraspinatus Tendinitis and Lateral Epicondylitis**

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### **ABSTRACT**

**CASE HISTORY:** The patient is a 48-year-old female who is a full-time mother and enjoys horseback riding and walking her dog. She recently sought treatment for pain accompanied with limited mobility in her right shoulder. These acute conditions came about after the subject experienced an accidental fall while getting onto a horse, in which she had to suddenly fully extend her right arm behind her against a wall to catch herself from falling. Prior to the event, the subject had sought treatment for pain in her right elbow. An orthopedic surgeon diagnosed her with right lateral epicondylitis and prescribed a right counter-force brace for her elbow. The subject states that the brace only partially helps ease the pain. **PHYSICAL EXAM:** The patient was diagnosed physically by means of the Hawkins Kennedy Test and the Empty Can Test, which both identify lack of integrity of the supraspinatus tendon. The positive results of these examinations are not exclusive to tendonitis but palpatory findings indicate the source of the complications as the tendon of the supraspinatus. Additionally, functional testing of the shoulder, including range of motion tests, indicate imbalances that were addressed as part of the treatment plan. **DIFFERENTIAL DIAGNOSES:** Shoulder: shoulder bursitis, PASTA (partial articular-sided supraspinatus tendon avulsion), rotator cuff tear. Elbow: radial tunnel syndrome, posterior interosseous nerve syndrome, osteochondritis dissecans. **TESTS & RESULTS:** All examinations were performed physically, and no imaging was ordered due to the patient's improvement following treatments and recommended actions. **FINAL DIAGNOSIS:** Right grade II supraspinatus tendinitis and ipsilateral lateral epicondylitis. **DISCUSSION:** Tendinopathies account for over 30% of musculoskeletal consultations, and shoulder pain is the third most common musculoskeletal complaint. Supraspinatus tendinitis is an inflammatory condition brought on by an acute episode of overload to the musculotendinous unit that creates microtears in the tendon. Thirty percent of supraspinatus tendinitis cases are caused from trauma to the region. The prevalence of the disorder is higher with age and is most common in those ages 30 to 60, with women having a higher prevalence than men. Lateral epicondylitis is an inflammatory condition where extensor tendons of the forearm, most commonly the extensor carpi radialis brevis, suffer trauma from overuse or overload resulting in pain and inflammation. Lateral epicondylitis is a common condition and is most prevalent in women ages 45-54 often brought out by forceful or repetitive motion. Considering the subject's age, gender, and symptoms this was a logical diagnosis of her conditions. **OUTCOME OF THE CASE:** The treatment plan consisted soft tissue mobilization, joint mobilization, scapulothoracic mobilization, and shoulder stabilization. Moreover, the patient was educated in the condition and given exercises to perform to correct her posture. **RETURN TO ACTIVITY AND FURTHER FOLLOW-UP:** Normal recovery for acute tendinopathies are several days to several weeks. Through the treatments and recommendations, the patient is seeing improvements and is advised to continue her exercises until fully recovered.