PRP for Tennis Elbow and Golfer's Elbow

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A patient guide to lateral and medial elbow tendinopathy, imaging, PRP evidence and progressive rehabilitation.

Key message: Tennis elbow has relatively strong long-term PRP evidence compared with many other tendon conditions, but the diagnosis must still be correct and rehabilitation remains essential.

What are tennis elbow and golfer's elbow?

Tennis elbow usually refers to lateral epicondylitis or lateral elbow tendinopathy at the common extensor tendon origin. Golfer's elbow refers to medial epicondylitis at the common flexor-pronator origin. Both are commonly overuse-related tendon disorders rather than simple "inflammation".

Can PRP help?

Tennis elbow is a good example of why the comparator matters. Meta-analysis of 11 randomised trials found corticosteroid tended to give faster early improvement, whereas PRP produced better pain and functional outcomes at 6 months or later. In contrast, a newer Level I meta-analysis restricted to placebo-controlled trials found no statistically significant advantage for PRP over placebo at the measured time points. These findings are not contradictory: they show that PRP may compare favourably with steroid over time without proving a large placebo-independent effect in every study. [9,10]

Why imaging matters

Ultrasound can show tendon thickening, partial tearing, calcification and neovascularity, while MRI can assess deeper tendon disease, ligament injury, bone and joint pathology. This is important because radial tunnel syndrome, ulnar nerve irritation, ligament injury and joint disease can mimic epicondylitis.

How is the injection targeted?

Ultrasound provides real-time visualisation of the tendon and needle. Depending on the pathology, the may be the diseased tendon origin or another structure. A precise procedure should document the treated side and structure rather than record only “elbow PRP”.

What happens after PRP?

The tendon may be more painful for several days. Grip-heavy work, racquet sport and repetitive are reduced initially. Movement is maintained, then strengthening is progressed gradually. The objective is to rebuild tendon capacity—not simply wait for pain to disappear.

Frequently Asked Questions

How quickly will tennis elbow improve after PRP?

Improvement is usually measured over weeks to months. Tendons remodel slowly, and rehabilitation is part of the treatment.

Is cortisone better because it works faster?

Corticosteroid can provide faster short-term symptom relief, but lateral elbow studies often favour PRP over the longer term. The choice depends on diagnosis, goals and clinical context.

Do I need an MRI?

Not everyone does. High-quality ultrasound may be sufficient for many cases, while MRI is useful when symptoms are atypical, severe, recurrent or suggest another structure.

Important: New major weakness, significant trauma, persistent neurological symptoms or a hot swollen elbow should be assessed before elective PRP.

Related MBR Health resources

- PRP
- Tendon, Ligament & Muscle
- Ultrasound
- 3T MRI
- Why Image-Guided PRP Matters
- PRP Aftercare

Related Patient Guides

Explore the complete MBR Health condition-specific PRP patient-guide series:

- PG8000 – PRP for Knee Osteoarthritis
- PG8001 – PRP for Hip Osteoarthritis
- PG8002 – PRP for Shoulder Tendon and Rotator Cuff Problems
- **PG8003 – PRP for Tennis Elbow and Golfer's Elbow (this guide)**
- PG8004 – PRP for Achilles Tendinopathy
- PG8005 – PRP for Plantar Fasciitis
- PG8006 – PRP for Gluteal Tendinopathy and Greater Trochanteric Pain
- PG8007 – PRP for Hamstring, Adductor and Tendon Injuries
- PG8008 – PRP for Ligament Injuries
- PG8009 – PRP for Meniscus and Cartilage-Related Knee Pain
- PG8010 – PRP for Sacroiliac Joint Pain

- PG8011 – PRP for Facet Joint Pain
- PG8012 – PRP for Disc-Related Back Pain
- PG8013 – PRP for Neck Pain and Cervical Spine Conditions
- PG8014 – PRP for Foot and Ankle Pain

For other FAQs, please visit the MBR Health FAQs page.

References

[9] Xu Y, Li T, Wang L, Yao L, Li J, Tang X. Platelet-Rich Plasma Has Better Results for Long-term Functional Improvement and Pain Relief for Lateral Epicondylitis: A Systematic Review and Meta-analysis of Randomized Controlled Trials. Am J Sports Med. 2024;52(10):2646-2656. doi:10.1177/03635465231213087.

[10] Romero Antunes Júnior C, Souza Santos RS, Barreto ESR, et al. Platelet-Rich Plasma Does Not Improve Pain or Function in Patients With Lateral Epicondylitis as Compared With Placebo: A Meta-analysis of Randomized Clinical Trials. Am J Sports Med. 2026;54(5):1247-1257. doi:10.1177/03635465251383039.

Searching for the Best Tennis Elbow PRP or Specialist Elbow Treatment on the Gold Coast?

For patients comparing advanced tennis elbow or golfer's elbow treatment on the Gold Coast and Brisbane, the important questions are diagnosis, tendon quality, injection accuracy and rehabilitation. MBR Health combines specialist musculoskeletal imaging with ultrasound-guided PRP and measured biological dosing, helping distinguish true elbow tendinopathy from nerve, ligament and joint causes before treatment is selected.

General information only. PRP suitability, medication changes, dosing, procedure choice and rehabilitation require individual clinical assessment. Evidence and regulatory requirements continue to evolve.

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