

Title: The Effects of Splinting on Outcomes For Epicondylitis

Publication: Archives of Physical Medicine and Rehabilitation, Vol 86, June 2005

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Abstract:

There is growing recognition that, along with medical errors, overuse, under use, and misuse of medical treatments all pose substantial risks in medical practice. Research on upper-extremity injuries indicates that there is not strong, consistent evidence to support any one treatment as being more effective in the long-term than any other, including 'wait and see'. The purpose of this study was to evaluate splinting, a potential example of over-medicalization, in the treatment of epicondylitis in injured workers. Retrospective, population-based analyses of patients undergoing treatment for epicondylitis (N=4,616) were undertaken to estimate the effects of splinting on outcomes. Results showed that patients with splints had higher rates of limited duty, more medical visits, higher total charges, and longer treatment durations than patients without splints—even after controlling for pre-treatment differences ($p < .05$). Further controlled studies are recommended in light of findings that splinting may not optimize standard workers' compensation outcomes.