

# Shock-wave therapy versus corticosteroid injection on lateral epicondylitis: a meta-analysis of randomized controlled trials

Yuan Xiong, Hang Xue, Wu Zhou, Yun Sun, Yi Liu, Qipeng Wu, Jing Liu, Liangcong Hu, Adriana C. Panayi, Lang Chen, Chenchen Yan, Bobin Mi & Guohui Liu

<https://doi.org/10.1080/00913847.2019.1599587>

## ABSTRACT

**Background:** Shock-wave (SW) therapy has been widely promoted and proven to be effective in ameliorating symptoms of lateral epicondylitis (LE) during recent years. Corticosteroid (CS) injection is another common treatment of LE, and several researches have documented its significant effect in the treatment of LE. Despite this, few studies have focused on comparing the use of SW and CS in the treatment of LE. The aim of this meta-analysis is to assess whether SW is superior to CS in managing LE, both in terms of ameliorating pain and improving functionality.

**Methods:** A systematic search of the literature was conducted to identify relevant articles that were published in Pubmed, Medline, Embase, the Cochrane Library, SpringerLink, Clinical Trials.gov and OVID from the databases' inception to December 2018. All studies comparing the efficacy of SW and CS in terms of pain levels and functionality improvement were included. Data on the two primary outcomes were collected and analyzed using the Review Manager 5.3.

**Results:** Four studies were included in the current meta-analysis. A significant difference in VAS score (SMD = 1.13, CI 0.72–1.55  $P < 0.00001$ ,  $I^2 = 0$ ) was noted between the SW group and the CS group. Furthermore, Significant difference was also seen in the term of grip strength (including HGS and GSS scoring system) (SMD = -1.42, CI -1.85--0.98  $P < 0.00001$ ,  $I^2 = 0$ ).

**Conclusions:** In light of the better improvement in the terms of VAS and grip strength with follow-up more than 12 weeks, we assume that SW may be a superior alternative for the treatment of LE.

**KEYWORDS:**

Lateral epicondylitis | shock-wave | corticosteroid | therapy injection

## **Acknowledgments**

This work was accomplished with the help of the library of Huazhong University of Science and Technology.

## **Declaration of interest**

The authors have no relevant affiliations or financial involvement with any organization or entity with a financial interest in or financial conflict with the subject matter or materials discussed in the manuscript. This includes employment, consultancies, honoraria, stock ownership or options, expert testimony, grants or patents received or pending, or royalties. Peer reviewers on this manuscript have no relevant financial relationships to disclose.

## **Availability of data and materials**

Please contact the corresponding author, Guohui Liu, for data requests.

## **Additional information**

### **Funding**

This study was supported by grants from the National Natural Science Foundation of China [No. 81772345]. The funder had no role in study design, data collection and analysis, decision to publish, or preparation of the manuscript.

## Notes on contributors

**Yuan Xiong**

**Yuan Xiong** and **Hang Xue** participated in the design of the study

**Hang Xue**

**Bobin Mi** and **Yi Liu** carried out data curation

**Wu Zhou**

**Jing Liu** and **Qipeng Wu** performed the statistical analysis

**Yun Sun**

**Lang Chen** and **Qipeng Wu** carried out investigation

**Yi Liu**

**Bobin Mi** and **Chenchen Yan** carried out project administration

**Qipeng Wu**

**Yun Sun** and **Wu Zhou** operated software

**Jing Liu**

**Yuan Xiong** carried out supervision

**Liangcong Hu**

**Liangcong Hu** and **Wu Zhou** carried out validation

**Adriana C. Panayi**

**Yuan Xiong** and **Hang Xue** conceived of the study, and participated in its design and coordination and helped to draft the manuscript;

**Lang Chen**

**Guohui Liu, Yuan Xiong** and **Adriana C. Panayi** participated in the sequence alignment and drafted the manuscript. All authors read and approved the final manuscript.

## References

1. Hong QN, Durand MJ, Loisel P. Treatment of lateral epicondylitis: where is the evidence?. *Joint Bone Spine*. 2004;71:369–373.  
[PubMed](#) | [Web of Science](#) | [@Google Scholar](#)
2. Tarpada SP, Morris MT, Lian J, et al. Current advances in the treatment of medial and lateral epicondylitis. *J Orthop*. 2018;15:107–110.  
[PubMed](#) | [Web of Science](#) | [@Google Scholar](#)
3. Calandruccio JH, Steiner MM, Blood A. Platelet-rich plasma injections for treatment of lateral epicondylitis. *Orthop Clin North Am*. 2017;48:351–357.  
[PubMed](#) | [Web of Science](#) | [@Google Scholar](#)
4. Lin YC, Wu WT, Hsu YC, et al. Comparative effectiveness of botulinum toxin versus non-surgical treatments for treating lateral epicondylitis: a systematic review and meta-analysis. *Clin Rehabil*. 2018;32:131–145.  
[PubMed](#) | [Web of Science](#) | [@Google Scholar](#)
5. Tsikopoulos K, Tsikopoulos A, Natsis K. Autologous whole blood or corticosteroid injections for the treatment of epicondylopathy and plantar fasciopathy? A systematic review and meta-analysis of randomized controlled trials. *Phys Ther Sport*. 2016;22:114–122.  
[PubMed](#) | [Web of Science](#) | [@Google Scholar](#)
6. Dong W, Goost H, Lin XB, et al. Injection therapies for lateral epicondylalgia: a systematic review and bayesian network meta-analysis. *Br J Sports Med*. 2016;50:900–908.

[PubMed](#) | [Web of Science](#) | [@Google Scholar](#)

7. Branson R, Naidu K, Toit C, et al. Comparison of corticosteroid, autologous blood or sclerosant injections for chronic tennis elbow. *J Sci Med Sport*. 2017;20:528–533.  
[PubMed](#) | [Web of Science](#) | [@Google Scholar](#)
8. Swindell HW, Trofa DP, Noticewala MS, et al. Fifty most-cited articles on lateral epicondylitis of the elbow. *J Am Acad Orthop Surg Glob Res Rev*. 2018;2:e004.  
[PubMed](#) | [Google Scholar](#)
9. Peterson M, Even BH. a “simple” pain condition such as “tennis elbow” is not only a somatic experience: body and mind are inseparable entities. *Scand J Pain*. 2013;4:153–154.  
[PubMed](#) | [Google Scholar](#)
10. Lian J, Mohamadi A, Chan JJ, et al. Comparative efficacy and safety of nonsurgical treatment options for enthesopathy of the extensor carpi radialis brevis: a systematic review and meta-analysis of randomized placebo-controlled trials. *Am J Sports Med*. 2018; undefined:363546518801914. doi: 10.1177/0363546518801914  
[PubMed](#)[Google Scholar](#)
11. Lee GJ, Park D. Usefulness of polydeoxyribonucleotide as an alternative to corticosteroids in patients with lateral epicondylitis: a case series. *Medicine (Baltimore)*. 2018;97:e10809.  
[PubMed](#) | [Web of Science](#) | [@Google Scholar](#)
12. Ben-Nafa W, Munro W. The effect of corticosteroid versus platelet-rich plasma injection therapies for the management of lateral epicondylitis: a systematic review. *SICOT J*. 2018;4:11.  
[PubMed](#) | [Web of Science](#) | [@Google Scholar](#)
13. Hsieh LF. Comparison between corticosteroid and lidocaine injection in the treatment of tennis elbow: A randomized, double-blinded, controlled trial. *Am J Phys Med Rehabil*. 2018;97:e86.  
[PubMed](#) | [Google Scholar](#)
14. Fujihara Y, Huetteman HE, Chung TT, et al. The effect of impactful articles on clinical practice in the United States: corticosteroid injection for patients

with lateral epicondylitis.plast. Reconstr Surg. 2018;141:1183–1191.  
[PubMed](#) | [Web of Science](#) | [@Google Scholar](#)

15. Beyazal MS, Devrimsel G. Comparison of the effectiveness of local corticosteroid injection and extracorporeal shock wave therapy in patients with lateral epicondylitis. J Phys Ther Sci. 2015;27:3755–3758.  
[PubMed](#) | [Google Scholar](#)
16. Gündüz R, Fü M, Borman P, et al. Physical therapy, corticosteroid injection, and extracorporeal shock wave treatment in lateral epicondylitis. clinical and ultrasonographical comparison. Clin Rheumatol. 2012;31:807–812.  
[PubMed](#) | [Web of Science](#) | [@Google Scholar](#)
17. Ozturan KE, Yucel I, Cakici H, et al. Autologous blood and corticosteroid injection and extracorporeal shock wave therapy in the treatment of lateral epicondylitis. Orthopedics. 2010;33:84–91.  
[PubMed](#) | [Google Scholar](#)
18. Crowther MA, Bannister GC, Huma H, et al. A prospective, randomised study to compare extracorporeal shock-wave therapy and injection of steroid for the treatment of tennis elbow. J Bone Joint Surg Br. 2002;84:678–679.  
[PubMed](#)[Google Scholar](#)
19. Rompe JD, Hope C, Küllmer K, et al. Analgesic effect of extracorporeal shock-wave therapy on chronic tennis elbow. J Bone Joint Surg Br. 1996;78:233–237.  
[PubMed](#) | [Google Scholar](#)
20. Lizis P. Analgesic effect of extracorporeal shock wave therapy versus ultrasound therapy in chronic tennis elbow. J Phys Ther Sci. 2015;27:2563–2567.  
[PubMed](#) | [Google Scholar](#)
21. Palaniswamy V, Ng SK, Manickaraj N, et al. Relationship between ultrasound detected tendon abnormalities, and sensory and clinical characteristics in people with chronic lateral epicondylalgia. PLoS ONE. 2018;13:e0205171.

[PubMed](#) | [Web of Science](#) [@Google](#) | [Scholar](#)

22. Verhaar JA, Walenkamp GH, Van MH, et al. Local corticosteroid injection versus cyriax-type physiotherapy for tennis elbow. *J Bone Joint Surg Br.* 1996;78:128–132.  
[PubMed](#) | [Google Scholar](#)
23. Mi B, Liu GH, Zhou W, et al. Platelet rich plasma versus steroid on lateral epicondylitis: meta-analysis of randomized clinical trials. *Phys Sportsmed.* 2017;45:97–104.  
[PubMed](#) | [Web of Science](#) | [@Google Scholar](#)
24. Razavipour M, Azar MS, Kariminasab MH, et al. The short term effects of shock-wave therapy for tennis elbow: a clinical trial study. *Acta Inform Med.* 2018;26:54–56.  
[PubMed](#) | [Google Scholar](#)
25. Alessio-Mazzola M, Repetto I, Biti B, et al. Autologous US-guided PRP injection versus US-guided focal extracorporeal shock wave therapy for chronic lateral epicondylitis: a minimum of 2-year follow-up retrospective comparative study. *J Orthop Surg (Hong Kong).* 2018;26:2309499017749986.  
[Google Scholar](#)
26. Yang TH, Huang YC, Lau YC, et al. Efficacy of radial extracorporeal shock wave therapy on lateral epicondylitis, and changes in the common extensor tendon stiffness with pretherapy and posttherapy in real-time sonoelastography: a randomized controlled study. *Am J Phys Med Rehabil.* 2017;96:93–100.  
[PubMed](#) | [Web of Science](#) | [@Google Scholar](#)
27. Król P, Franek A, Durmała J, et al. Focused and radial shock wave therapy in the treatment of tennis elbow: a pilot randomised controlled study. *J Hum Kinet.* 2015;47:127–135.  
[PubMed](#) | [Web of Science](#) | [@Google Scholar](#)
28. Köksal İ, Güler O, Mahiroğulları M, et al. Comparison of extracorporeal shock wave therapy in acute and chronic lateral epicondylitis. *Acta Orthop Traumatol Turc.* 2015;49:465–470.  
[PubMed](#) | [Web of Science](#) | [@Google Scholar](#)

29. Trentini R, Mangano T, Repetto I, et al. Short- to mid-term follow-up effectiveness of US-guided focal extracorporeal shock wave therapy in the treatment of elbow lateral epicondylitis. *Musculoskelet Surg.* 2015; null:S91–7. doi: 10.1007/s12306-015-0361-4  
[PubMed](#)[Google Scholar](#)
30. Degen Ryan M, Cancienne Jourdan M, Camp Christopher L, et al. Patient-related risk factors for requiring surgical intervention following a failed injection for the treatment of medial and lateral epicondylitis. *Phys Sportsmed.* 2017;45:433–437.  
[PubMed](#) | [Web of Science](#) | [@Google Scholar](#)
31. Eraslan L, Yuce D, Erbilici A, et al. Does kinesiotaping improve pain and functionality in patients with newly diagnosed lateral epicondylitis? *knee surg sports. Traumatol Arthrosc.* 2018;26:938–945.  
[PubMed](#) | [Web of Science](#) | [@Google Scholar](#)
32. Spacca G, Necozone S, Cacchio A. Radial shock wave therapy for lateral epicondylitis: a prospective randomised controlled single-blind study. *Eura Medicophys.* 2005;41:17–25.  
[PubMed](#) | [Google Scholar](#)
33. Wilson JJ, Best TM. Common overuse tendon problems: a review and recommendations for treatment. *Am Fam Physician.* 2005;72:811–818.  
[PubMed](#) | [Web of Science](#) | [@Google Scholar](#)
34. Chung B, Wiley JP. Effectiveness of extracorporeal shock wave therapy in the treatment of previously untreated lateral epicondylitis: a randomized controlled trial. *Am J Sports Med.* 2004;32:1660–1667.  
[PubMed](#) | [Web of Science](#) | [@Google Scholar](#)