Professor Bijay Singh

Upper Limb, Trauma & Sports Medicine

FRCS (T&O), FRCS, MS, DNB, PG Dip

Visiting Professor, Canterbury Christchurch University

Visiting Professor, AIIMS Raipur

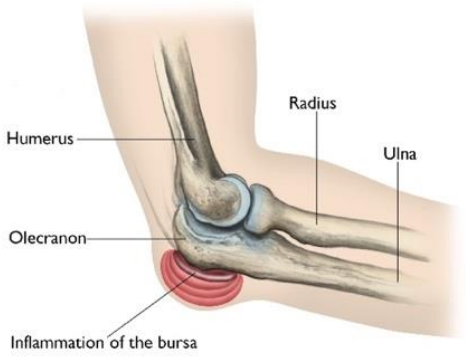
Personal • Precise • Proven • Shoulder to Finger

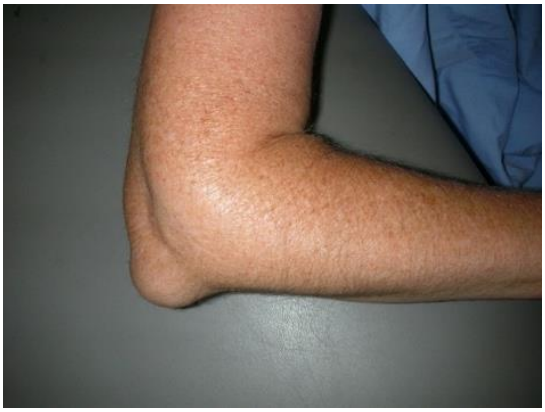
OLECRANON BURSA / SPUR

This leaflet provides general information to help you understand Olecranon Bursa / Spur and the available treatment options.

Not everyone with Olecranon Bursa / Spur needs surgery.

At the heart of my practice is **Shared Decision-Making**. Whether we pursue conservative management (Plan A) or surgical intervention (Plan B), the goal is to create a tailored treatment plan that aligns with your lifestyle, values, and functional goals.





This leaflet provides general information and does not replace individual medical advice.

Practice Locations

- **LIPS Healthcare London**
- **Spire Alexandra Hospital Chatham**
- **Practice Plus Group Gillingham**

Private Practice Manager

Kim White

☎ **07361 895875**

✉ kim.white@kims.org.uk

www.kentorthopaedicpractice.co.uk

More Info

Scan to visit our website

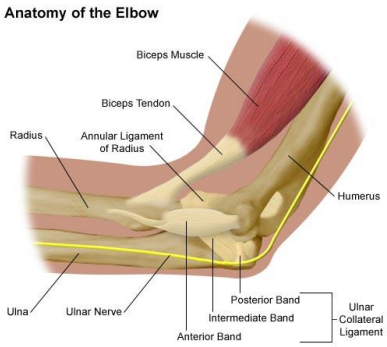
Anatomy of the Elbow

The elbow is a hinged joint connecting the upper arm to the forearm, relying on several structures for stability and movement:

How the Elbow Works

The joint connects:

- **Humerus** – upper arm bone
- **Radius and Ulna** – forearm bones



Stability

Maintained by the shape of the bones and collateral ligaments on each side.

Nerve Considerations

- **The ulnar nerve** runs behind the inner elbow (medial epicondyle).
- **Bone spurs (osteophytes)** can compress this nerve, causing numbness, tingling, or weakness in the ring and little fingers.

Understanding the Condition

A **bursa** is a thin, slippery sac that acts as a cushion between bone and soft tissue. The **olecranon bursa** sits right at the tip of your elbow (the olecranon), allowing the skin to glide smoothly over the bone.

When this sac becomes irritated, it fills with fluid, causing a visible swelling often called “Student's Elbow” or “Plumber's Elbow.”

What Is an Olecranon Spur?

In some people, an extra bit of bone (a spur) develops on the tip of the elbow. This is often caused by enthesopathy – where the triceps tendon pulls on the bone over a long period, causing the body to grow extra bone in response to the stress. These spurs can rub against the bursa, causing further inflammation.

Common Causes

- **Inflammation:** most commonly caused by repetitive pressure, such as leaning on your elbows on hard desks or surfaces.
- **Trauma:** a direct blow to the point of the elbow can cause the bursa to fill with blood or fluid.
- **Infection (Septic Bursitis):** bacteria can enter the bursa through a small cut or scrape.
- **Medical Conditions:** conditions like Gout or Rheumatoid Arthritis can make you more prone to bursa swelling.

Symptoms

- **Swelling:** a soft, “goose-egg” lump on the tip of the elbow.
- **Pain:** tenderness when leaning on the elbow or when fully bending the arm.
- **Redness/Heat:** usually indicates an infection or an inflammatory flare-up like Gout.

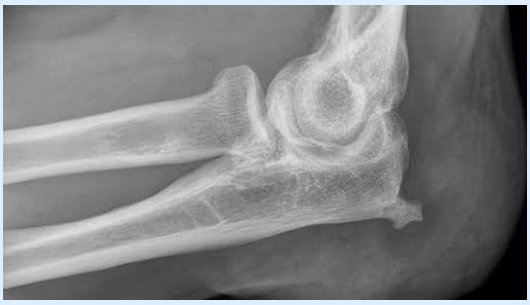
Red Flags — When to Seek Urgent Help

A hot, swollen elbow with fever, or rapidly worsening pain and redness over the joint, needs urgent assessment. If you experience any of the above, contact the practice, your GP, NHS 111, or attend your nearest Emergency Department.

Diagnosis

I will diagnose this primarily through a physical exam:

- **X-rays:** essential to see if a bony spur is present on the tip of the elbow.
- **Ultrasound/MRI:** used if I need to check the volume of fluid or look for underlying tendon and joint issues.



Treatment Options: A Shared Decision

I will discuss all available treatment options with you, explaining the benefits and risks of each. Your preferences, values, and lifestyle will be considered as we work together to create a treatment plan best suited to your needs — this shared decision-making process ensures you are fully informed and involved in your care.

Plan A — Non-Surgical

- **Activity Modification:** avoiding leaning on the elbow and using elbow pads for protection.
- **Compression:** wearing a supportive sleeve or bandage to help the body reabsorb the fluid.
- **Aspiration:** draining the fluid with a needle to relieve pressure, often followed by a tight bandage.
- **Anti-inflammatories:** medications like ibuprofen to reduce the swelling.
- **Steroid Injections:** used for persistent non-infected swelling to "dry up" the bursa.

Plan B — Surgical

Considered if swelling recurs or a large spur is present

- **Bursa Excision:** the entire sac is removed through a small incision. The body eventually grows a new, healthy bursa in its place.
- **Spur Removal:** if a bony spur is present, it is smoothed down during surgery to prevent future irritation.

Important Things to Remember

- Olecranon Bursa / Spur is not dangerous
- Many people improve without surgery
- Surgery is optional
- Doing nothing is always an option

Questions You May Wish to Ask

- What treatments should I try first?
- How long should I try them for?
- What improvement can I expect?
- What happens if I choose not to have surgery?

Book or Enquire Directly at Each Site

LIPS Healthcare London	☎ **02038709996**	✉ **singh.admin@lips.org.uk**
Spire Alexandra Chatham	☎ **01634 662866**	✉ **alexandraselfpaypsc@spirehealthcare.com**
Practice Plus Gillingham	☎ **01634 969045**	✉ **Private.gillingham@practiceplusgroup.com**