

# Operative Treatment of Ulnar Collateral Ligament Insufficiency of the Elbow in Female Athletes

David Argo, MD\*, Scott W. Trenhaile, MD, Felix H. Savoie III, MD, and Larry D. Field, MD

Address correspondence to Felix H. Savoie III, MD, 1325 East Fortification Street, Jackson, MS 39202 (e-mail: [busavoie@aol.com](mailto:busavoie@aol.com)).

## Abstract

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**Background:** As women become more involved in athletic activity, injuries specific to this population also increase. No data exist regarding operative treatment of female patients with elbow instability secondary to ulnar collateral ligament insufficiency.

**Hypothesis:** Women with symptomatically unstable elbows who failed nonoperative treatment will improve after surgical intervention.

**Study Design:** Case series; Level of evidence, 4.

**Methods:** Nineteen women were retrospectively evaluated using the Andrews and Carson Elbow Outcome Score. Patients were included if they underwent repair or reconstruction of the ulnar collateral ligament for symptomatic instability that precluded them from participation in their desired sport or activities, despite nonoperative treatment.

**Results:** The mean age was 22.0 years (range, 15.1-37.2 years). The mean follow-up was 38.8 months (range, 12.4 – 68.6 months). Of the 19 patients, 14 were softball players, gymnasts, and tennis players. Only 1 was a pitcher. Eighteen women underwent repair by one of the following procedures: placcation (n=6), repair to bone using anchors (n=11), or drill holes (n=1). One patient underwent a palmaris graft reconstruction. The mean overall preoperative outcome score of 120 improved to 191 postoperatively. One patient did not participate in athletics.

**Conclusion:** This study demonstrated excellent overall results in 16 and good results in 3 female patients after medial elbow repair or reconstruction. Women appear to be able to consistently return to a high level of function after repair or reconstruction for medial elbow instability.