A male farm worker aged thirty-five had noticed for ten years a gradually increasing symptomless swelling at the back of the left arm just above the elbow. One year before operation he fell and injured the elbow; soon afterwards an abscess began to discharge spontaneously through a sinus at the back of the elbow. Local excision of the mouth of the sinus was unsuccessful.

On examination, there was a small discharging sinus immediately proximal to the tip of the olecranon process. More proximally, over the triceps tendon, there was a firm oval swelling which was adherent to the tendon but not to the overlying tissues nor to the humerus. There was a full range of elbow movement. Radiographs showed no abnormality.

**Operation**—A longitudinal incision was made. The sinus track was dissected out and was found to be continuous with the ragged interior of the swelling. The tumour was a granulomatous mass adherent to the triceps tendon, which was eroded in places. The limits of the mass were ill-defined and it had to be removed piecemeal, partly at the expense of the triceps tendon, which was considerably thinned. The skin wound was sutured and the elbow immobilised for four weeks. The wound healed without incident and a full range of elbow movement had been regained six weeks after operation. Histological examination of the excised specimen confirmed the diagnosis of tuberculosis. When the patient was last examined, eighteen months after operation, the scar was sound and there was a full range of elbow movement.

**Comment**—This case is unusual only because of the site of the tuberculous lesion. The process cannot be regarded as a tenosynovitis similar to that affecting the tendon sheaths at the wrist, for the triceps tendon has no true sheath. Nor is it likely that the infection began in the olecranon bursa, because the granuloma was well proximal to that structure. It seems probable that the lesion arose in the loose synovial tissues behind the triceps tendon and involved the posterior fibres of the tendon by direct spread.