

Carpal tunnel syndrome leaflet - MSK solutions

What is carpal tunnel syndrome?

Disclaimer: This information may be useful for those who have been diagnosed with this condition. People who are experiencing new or ongoing symptoms should visit their health care professional for assessment, diagnosis or treatment.

Carpal tunnel syndrome (CTS) is a relatively common condition affecting the median nerve as it passes through a narrow tunnel at your wrist.

Carpal tunnel syndrome is more common in women than men. It tends to develop in people between the ages of 50 to 54 and 75 to 84. It is also common during pregnancy, affecting up to 50% of pregnant women. It is thought that this may be due to the extra fluid that often occurs during pregnancy.

The carpal tunnel is made up of the bones of your wrist called carpals and a thick ligament. The tunnel contains the tendons that bend your fingers and thumb as well as the median nerve. Unfortunately sometimes the nerve gets squashed and can cause symptoms such as pain, numbness and burning or tingling in your thumb, index and middle fingers and part of the ring finger.

It is often worse at night or first thing in the morning. It may also become a problem when holding an object such as a phone or book or the steering wheel when your wrist is bent forwards. It can result in feelings of weakness and clumsiness in the hand with reduced sensation and reduced grip strength.

What Causes of carpal tunnel syndrome?

- Occupation: a job that involves repeated forceful movements of your wrist, e.g. using a screwdriver or vibration tools, or computer based activities
- Diabetes
- Inflammation of the tendons
- Fracture at the wrist
- Rheumatoid arthritis in your wrist joint
- Pregnancy/menopause
- Thyroid problems

How is it diagnosed?

The main way we diagnose CTS is by listening to what you tell us and by examining your wrist and hand [and if indicated your neck](#).

Nerve conduction studies may be required depending on your symptoms but are not essential to make a diagnosis.

Blood tests are sometimes taken to see if there is any inflammation, or thyroid problems that may be contributing to the problem.

Sometimes nothing abnormal is found.

What is the best treatment?

Self Help:

Advice for day to day activities and at work

Try to vary your activities during the day ensuring that you are not doing lots of repeated squeezing, gripping, wringing, etc.

Try alternate activities between heavier and lighter activities to reduce any strain.

Be aware of your wrist position and try and avoid having it bent in either direction for any period of time. Consider other ways of doing a task to reduce this or increase the amount of rest you take between such activities.

Work

It is usually recommended that you try to stay at work, or get back to work as soon as possible. You do not need to be pain or symptom free to return to work. Research has shown the longer you are off work the less likely it is that you will return to work.

Leisure

Consider using specific cycling gloves or soft conforming handles for cycling or using a lawn mower.

Hanging your arm out of bed or shaking your hands when they are numb or tingling may help. Stretching your wrist back may also help. Reach forwards as if pushing a door open, then reach upwards as if pushing the ceiling. Try this 4 times a day, 10 times in a row.

Wrist splint

A wrist splint is often advised as a first active treatment option. The aim of the splint is to keep the wrist in a midline position. This is used at night to stop you bending your wrist whilst in your sleep as this is the position that squashes the median nerve. You may only need to use this for a few weeks in order to settle the symptoms.

If you experience any of the following when wearing your splint stop using the splint and contact your local therapy team:

- Swelling or pain from the splint
- Different colour or sensation in the limb such as pins and needles or numbness.
- Rubbing from the edges of the splint.

Health

If you are overweight, losing some weight may help. Pain medication may be prescribed to ease the pain. If the condition is part of a more general medical condition (such as arthritis) then treatment of that condition may help. Many people use medication to help them remain active and to cope with their pain and symptoms. It is recommended you take any medication as prescribed.

The symptoms can settle without treatment within a year or so in 1 in 4 cases. So, not treating is an option, particularly if symptoms are mild or if you're pregnant or under 30 years old. The situation can be reviewed if symptoms get worse.

Try to stay positive. There is a lot you can do to help yourself. Most symptoms do settle with time.

Other options

A steroid injection into the carpal tunnel is an option, but this is only done by a suitably trained health care practitioner.

In some cases surgery may be an option, if all other treatment options have been tried. The operation is called a carpal tunnel decompression and involves reducing the pressure on the nerve by opening the roof of the tunnel. The surgery is usually performed under local anaesthetic, but can sometimes be performed under a regional anaesthetic (injected at the shoulder to numb the entire arm). It takes about three months to regain full strength and a fully comfortable scar and the hand can be used for light activities from a day or two after surgery.

Surgery is usually very successful but if you have had symptoms of carpal tunnel for a long time prior to surgery you may find that you only get a partial recovery, but in this instance the surgery aims to stop the symptoms getting worse.

The main symptom to be aware of after surgery is scar sensitivity. This can be reduced by massaging the scar 3-4 times a day for 4 weeks following the removal of stitches.

Help and support

If, after following our advice, your problem hasn't improved within 6 weeks a referral to a Healthcare Professional may be of benefit.

When to seek Help

Speak to a healthcare professional as soon as possible if

- There has been significant trauma, for example a direct blow or fall
- You cannot move the affected body part at all
- Feel generally unwell
- Have pain that starts when you are ill with other problems such as rheumatoid arthritis or cancer
- Feel unsteady when you walk

Occupational Therapy Service

Buying a Wrist Splint – Patient information leaflet

Wrist Splints

This leaflet gives some simple advice on buying a wrist support.

The examples in this leaflet are suggestions and will give you an idea of what a wrist splint should look like.

Does it have to be a certain design?

Your wrist splint should have a metal bar in it to limit wrist movement. It should not limit your thumb or finger movement (Figure 1).



Figure 1

A Standard Wrist Splint

If you are going to use your splint to treat Carpal Tunnel Syndrome, look for one that states it is designed for that purpose. Ideally it should have a gentle bend in the metal bar. **WEAR THE SPLINT IN BED AT NIGHT .**

How are wrist splints sized?

Wrist splints are supplied in small, medium, large or extra large sizes. The size required is usually based on measuring around the wrist with a tape measure (Figure 2). Different suppliers may use different methods to size so always check.



Figure 2

Measuring around the wrist

Where do I get a splint from?

You can order wrist splints online or from a Pharmacy/Chemist. Please check with your local branch.

You can also order from the following companies. Other stockists and suppliers are available.

Promedics – Tel: 01475 746400 Order online: <http://www.promedics.co.uk>

Performance Health – Tel: 03448 730 035

Order online: <http://www.performancehealth.co.uk>

Amazon <http://www.amazon.co.uk>

Please follow the manufacturer's instructions for use and care of your splint.

This leaflet is also available on request in other formats by phoning 01387 272711
or emailing dumf-uhb.patient-information@nhs.net.

NHS Dumfries and Galloway would like to acknowledge NHS Fife for the content of this leaflet.
Produced by Occupational Therapy Service (v1) 2020