

## After the surgery

Your hand will be bandaged heavily, although you will be able to move your fingers. After a few days this bandage will be replaced with a lighter dressing. It is very important to get your fingers moving soon after surgery to prevent them getting stiff.

The stitches are removed at between 10-14 days and, once the wound has healed and you are comfortable and have regained full finger movements, you can start to drive again.

Returning to work is usually recommended at around 4 weeks, unless it is a particularly heavy job, where 6 weeks is recommended. This should be discussed with your surgeon.

Once the wound has healed you will be encouraged to massage the scar with a moisturising cream. This may be a little sensitive, which is normal, but the massaging will help flatten the scar and improve the sensitivity.

## Risks of surgery

**Incomplete Recovery** - as mentioned, it is impossible to predict what degree of improvement will be made from surgery.

**Damage to the nerve** - nerve damage is very rare, but can happen.

This may result in numbness in the palm or fingers. On occasions, patients can develop pain in the palm after surgery. This is called Pillar pain and can cause problems gripping but does generally settle over time.

**Complex Regional Pain** - this is a syndrome that can occur following any trauma, including hand surgery. The hand can become swollen, sensitive and painful; the reason for this developing is unknown but it can be treated with physiotherapy.

**Weakness of grip** - if you were to return to heavy lifting too early (within 4-6 weeks) this can cause bowstringing of the tendons previously held down by the ligament cut during surgery.

**Infection** - any operation could result in an infection, which can be treated with antibiotics.

**Scar tenderness** - the scar, once healed, can become tender to touch. This can be helped through regular massage.

**For further information contact the  
Hand Therapy Department on  
☎ Tel: (01803) 654935**

Carpal Tunnel/Orthopaedics/  
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South Devon Health Services

**PATIENT INFORMATION**



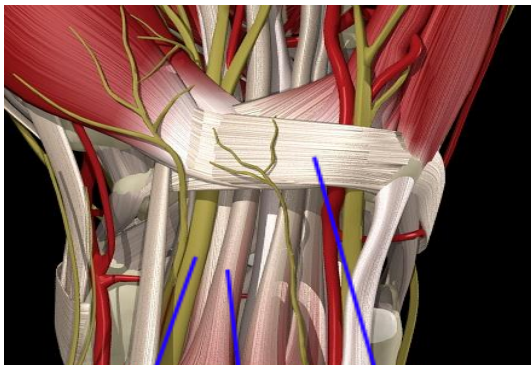
# Carpal Tunnel Syndrome

*Hand Surgery*

## Carpal Tunnel Syndrome

Carpal tunnel syndrome is caused by a nerve which passes through the wrist becoming compressed within the Carpal Tunnel. This nerve (the Median nerve) provides sensation to the thumb index middle and part of your ring finger; it also supplies a group of small muscles at the base of your thumb. It is one of the main nerves in the hand.

The carpal tunnel itself is exactly that - a tunnel! The floor of the tunnel is made up of a group of small bones and the roof by a tight ligament. Through this tunnel passes 9 tendons which help to bend your fingers and thumb and also your median nerve (see diag.). If the shape of the tunnel is altered, through trauma or arthritis, or if the tendons become inflamed, the nerve can get squashed.



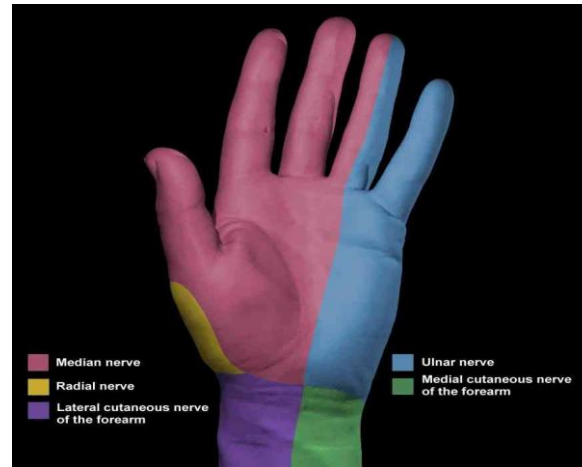
Interactive Hand Therapy 1.1 © 2000 Primal Pictures Ltd.

**Median nerve Tendons Ligament**

There are many causes of carpal tunnel syndrome but in most cases it is not clear why it occurs.

## Symptoms

The symptoms that occur include pins and needles, which usually affect the hand as in the diagram below (pink area).



Pain or burning in the same fingers can occur together with weakness of grip. In severe cases you can see wasting of the muscles that the nerve supplies as the messages from the nerve are blocked.

Commonly, the pins and needles are worse at night and are also aggravated when raising the hands - for example, when driving or holding up a book.

## Treatments

There are a few available treatments for this condition. Firstly, preventing the aggravating causes can sometimes give the nerve time to recover. Splinting often works well in helping with the pins and needles at night. An injection of steroid into the tunnel can provide good relief, however this provides only short-term relief.

Finally there is surgery. This is usually carried out under a local anaesthetic in the day surgery unit, and this means that you are not put to sleep and you do not stay in hospital over night. The procedure is usually carried out by a specialist nurse.

## Surgery

The surgery involves an incision down your palm. The ligament, or roof of the tunnel, is divided giving the nerve more space. The amount of recovery that one will gain depends generally on how badly the nerve has been squashed and for how long. The symptom of night pins and needles should improve quickly but the full improvement may take up to a year.

Please remember that during the surgery the nerve is not repaired but the surgery provides the nerve with more space in which to recover. Nerves behave unpredictably not everyone will recover completely.