



HEALTH INFORMATION

Carpal Tunnel Syndrome

What is Carpal Tunnel Syndrome?

Carpal tunnel syndrome (CTS) is a relatively common condition that causes pain, numbness, and a tingling sensation in the hand and fingers. Carpal tunnel syndrome is caused by compression of the nerve that controls sensation and movement in the part of the hand (median nerve). The carpal tunnel is a narrow passage in your wrist bordered by small bones (carpal bones) and a tough band of tissue (carpal ligament) containing the median nerve and tendons for some hand muscles.

It isn't known why the median nerve becomes compressed in most cases, although certain things are thought to increase the risk of CTS developing, such as: a family history of CTS, pregnancy, injuries to the wrist, diabetes, obesity, gout, oedema, rheumatoid arthritis and work with the hand which is strenuous and repetitive. While there is evidence that manual labour and work with vibrating tools can cause carpal tunnel syndrome, there is currently no evidence that it can be caused by typing.

Symptoms

Sensations of pain, numbness and tingling develop gradually and start off being worse during the night. They tend to affect the thumb, index finger, middle finger and half of the ring finger. Other symptoms of carpal tunnel syndrome include: pins and needles (paraesthesia), weakness and wasting of thumb muscles, a dull ache in the hand or arm, fingers feeling swollen, and changes in skin on the hand. The symptoms may be worsened by using the affected hand, particularly in repetitive actions.

Your hand may become weak and you may find it difficult to grip certain objects. Your manual dexterity for certain tasks may be reduced and you may find it difficult to use the affected fingers in specific tasks like typing and fastening buttons.

Carpal tunnel syndrome can usually be diagnosed by your GP when they examine your hand and hear about your symptoms. They may tap the median nerve in your wrist or flex your wrist to see if this induces the symptoms. If your GP is uncertain they may conduct blood tests for underlying conditions, nerve conduction studies to assess damage to the nerves, and imaging studies to look at the carpal tunnel.

Treatment

Treatment for carpal tunnel syndrome (CTS) depends on the severity of the condition and how long you have had it. In some cases, CTS will improve after a few months without treatment. Moving your hand or shaking your wrist can often help relieve the symptoms. When sleeping, hanging the affected arm over the side of the bed can also help. If symptoms persist, there are a range of non-surgical and surgical treatments available that aim to relieve the pressure on the median nerve. If your carpal tunnel syndrome is caused by an underlying condition, treating that can improve your symptoms.

In mild to moderate cases of carpal tunnel syndrome (CTS), treatments such as wrist splints and corticosteroid injections are often recommended. Surgery is usually only recommended for severe cases of CTS, when symptoms last for more than six months or other treatments have not been effective. During surgery the roof of the carpal tunnel, known as the carpal ligament, is cut to reduce pressure on the median nerve in the wrist. Surgery is performed under local anaesthetic and can be open or keyhole surgery. The latter has a quicker recovery time but both have the same long term success rate. Although you may have some use of your hand a few days after the operation depending on the nature of your job it may take weeks or months before you are able to return to work.

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