

Carpal Tunnel

What is Carpal Tunnel?

Carpal tunnel syndrome is a result of compression of the median nerve (and the smaller ulnar nerve) as it passes through the wrist. Both these nerves cross at the front of the wrist within a passage known as the carpal tunnel. Many tendons pass through this carpal tunnel too and if any swelling occurs, the large median nerve can easily be compressed causing the carpal tunnel syndrome. The symptoms include pain, tingling and numbness in the index and middle finger, and numbness of the thumb. Carpal tunnel syndrome can often be alleviated with splinting and medications. If these treatments fail to bring relief, an operation may be required.

Non-operative forms of treatment

Other treatments for carpal tunnel syndrome can include:

- Plenty of rest for the affected hand
- Physiotherapy
- Splints on the affected wrist and hand worn at night
- An injection of local anaesthetic and a steroid injection into the affected area to reduce the swelling.

Operative treatment

During open carpal tunnel release surgery, the transverse ligament is cut, which releases pressure on the median nerve and relieves the symptoms of carpal tunnel syndrome.

An incision is made at the base of the palm of the hand. This allows the doctor to see the transverse carpal ligament. After the ligament is cut, the skin is closed with stitches. The gap where the ligament was cut is left alone and eventually fills up with scar tissue.



If you have open carpal tunnel release surgery, you usually do not need to stay in the hospital. The surgery is either done under local anaesthetic or general anaesthetic, and usually you can go home on the same day.

What to expect after surgery

After surgery, the hand is wrapped. The stitches are removed approximately 10 days after surgery. The pain and numbness may go away right after surgery or may take several months to subside. You may have your wrist placed in a sling to help reduce swelling following your surgery. You may find your wrist is quite uncomfortable for a couple of days. Analgesia (pain relief) is given as prescribed by your Doctor. Advice is given to exercise your hand and wrist as soon as possible. Try to avoid heavy use of your hand for up to 3 months.

When you return to work depends on whether the dominant hand (the hand you use most) was involved, on your work activities, and on the effort that you put into rehabilitative physical therapy.

If you have surgery on your non-dominant hand and do not do repetitive, high-risk activities at work, you may return to work within 1 to 2 days, although 7 to 14 days is most common.

If you have surgery on your dominant hand and do repetitive activities at work, you may require 6 to 12 weeks for a full recovery before you can return to previous work duties. Physiotherapy may speed your recovery.

Taking care of yourself at home

Be guided by your Doctor or Surgeon but general suggestions include:

- When you are discharged home, you will more than likely need some help around the house.
- Continue your medication as prescribed by your doctor.
- Cold packs applied at regular intervals can help reduce post-operative swelling.
- Rest the hand as much as you can for at least four weeks following surgery.

Long-term outlook

The symptoms of carpal tunnel syndrome should ease dramatically after surgery. However, pain around the incision site may linger for some months. See your doctor if you are concerned about your degree of discomfort. Non-absorbable sutures will need to be removed by your doctor approximately 10 days after surgery. If you note any undue swelling, redness or heat in the operated area, see your doctor immediately, since these symptoms could indicate infection.

This brochure is a brief overview of Carpal tunnel and is not designed to be all- inclusive. If you have any further questions please discuss them with your Surgeon.