Patient information



Carpal Tunnel Syndrome Important information for all patients having Carpal **Tunnel surgery.**

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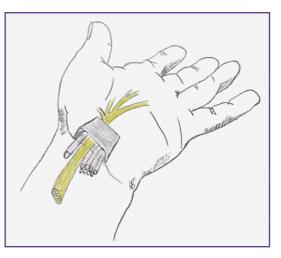
About this booklet

The purpose of this booklet is to tell you about Carpal Tunnel Syndrome, Carpal Tunnel Decompression Surgery, and looking after your wound.

Carpal Tunnel Syndrome

What is the Carpal Tunnel?

The Carpal Tunnel is a bony canal at the base of the wrist bounded on three sides by the carpal bones and covered by a thick ligament. It is as wide as the thumb and contains the tendons that bend the fingers and thumb and the Median nerve.



What is Carpal Tunnel Syndrome?

Carpal Tunnel Syndrome is caused by elevated pressure when the median nerve in the wrist area has become compressed as it passes under the Carpal Tunnel.

Who does Carpal Tunnel affect?

It occurs more commonly in women than men by a ratio three to one, and generally affects people aged 30-50 years but can occur at any age. It can occur in people with arthritis, thyroid problems, during pregnancy or after a fracture, but in most people, no cause is identified.

What are the symptoms of Carpal Tunnel Syndrome?

Carpal Tunnel Syndrome causes a pinching of the nerve, resulting in wrist pain, numbness and tingling. In the early stages, numbness and tingling are intermittent and sensation will return to normal. If the condition worsens, the altered feeling may become continuous, with numbness in the fingers and thumb together with weakness and wasting of the muscles at the base of the thumb.

Symptoms may include:

- altered feeling in the hand, affecting the thumb, index, middle and ring fingers (it is unusual for the little finger to be involved);
- pins and needles,
- a weak grip,
- feeling less coordinated, especially when carrying out fine hand movement,
- history of dropping things

How is Carpal Tunnel Syndrome treated?

In the early stages, Carpal Tunnel Syndrome may be reversible if:

- provocative activities are reduced,
- anti-inflammatory drugs are taken,
- · a wrist splint is used, and
- cortisone injections are given.

When non-operative treatments have failed and symptoms increase, surgical intervention can be carried out to prevent permanent nerve damage.

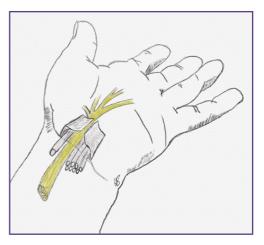
About Carpal Tunnel Decompression Surgery

What happens in the surgery?

Carpal Tunnel Surgery takes the pressure off the Median Nerve.

The palm of your hand will be numbed with a local anaesthetic. This means you will not feel any pain during the surgery, but you may feel some pressure.

A tight band called a tourniquet will be placed on your upper arm



to stop the blood flow for a few minutes so that the surgeon has a good view to do the operation.

Your surgeon will make a small cut over the tunnel, divide the ligament that sits tight over the nerve, and close the wound with a couple of stitches.

The operation is performed as a day case and usually takes about 10 minutes.

What are the risks?

Risks include:

- infection,
- bleeding,
- persistent symptoms,
- recurrent symptoms,
- stiffness of the hand,
- reduction in grip strength for six months, and
- a tender scar / pain either side of the scar.

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Tenderness/ pain can last a few months, or up to one year in rare instances. This can be improved my massaging the scar after your stitches are removed.

What are the potential complications?

The risk of a serious severe complication is very low.

There is a risk that the nerve or one of its small branches which supply sensation to your palm or the muscles which help move your thumb could get injured. This could leave you worse off than you are at the moment.

There is a very unusual and rare condition that can occur after any hand surgery. Complex Regional Pain Syndrome (CRPS) causes stiffness, swelling and pain out of proportion to what you have had done. This can be treated with special pain relief and physiotherapy but it can take a long time to recover from it.

After your surgery

What happens immediately after my surgery?

On return from theatre, you will have a bandage on your hand and your arm will be raised on a pillow or in a sling to keep it elevated to reduce any swelling.

The nursing staff will check your blood pressure and pulse. If this is all OK, you will be able to go straight home.

If you normally use a walking aid in the hand to be operated on, you will be seen by a Physiotherapist before you go home to ensure that you can walk safely. You should make sure that you keep your shoulder and elbow joints moving regularly on the operated side.

What can I expect during my recovery from surgery?

Night pain and tingling usually disappear within a few days. In severe cases, improvement of constant numbness and muscle weakness may be slow or incomplete. It generally takes about six months to regain full strength and three months for your scar to become comfortable.

When will I have my stitches removed?

Your stitches can be removed by your practice nurse about 10-14 days after the operation. You should contact your GP surgery when you go home to make an appointment to have your stitches removed.

When will I have a follow-up appointment and what will happen at it?

You will have an Outpatient appointment approximately six weeks after surgery.

What should I do if I experience any complications after my surgery?

Contact the Surgical Day Unit immediately if you experience:

- any further swelling,
- increasing pain,
- numbness, or
- change in the colour of your fingers.

The Surgical Day Unit is open Monday to Friday from 9am to 6pm. Outwith these hours, call 0141 951 5000 and ask to speak to the Senior Nurse.

Dressings

Keep your dressing clean and dry. You may need to use a plastic bag or rubber glove in the shower.

You may have been advised that you can take off the large bandage two days after your operation. You will have been supplied with some spare sticky dressings, but do not change this dressing unless you have to. If the dressing comes off by itself, try not to touch the wound, but do make sure that the skin is dry before replacing the dressing.

Keep the swelling down

It is important to avoid too much swelling in the hand. Keep your hand up as much as possible. Keep gently moving your fingers to make a fist. You should avoid any heavy lifting or vigorous use of your hand, at least until after your stitches are removed.

Driving

It is not recommended to drive until the stitches have been removed and your hand is comfortable enough to drive safely.

Removal of stitches

You should make an appointment with practice nurse to have the stitches removed between 10 and 14 days after your operation.

You can start your wound care after your stitches have been removed.

What is a scar?

A scar is a mixture of blood vessels, cells and fibrous tissue where there was once a wound in the skin. People scar differently. Scars are as unique as the individual.

How long do scars take to mature?

Your scar will go through a process of changing colour, depth, texture and shape over a period of 12 to 18 months.

How do I care for my scar?

It is important to care for your scar in the early stages after healing.

Scars lose the ability to produce their own oil and sweat, like the rest of the skin. After your stitches have been removed, it is important to moisturise and massage your scar regularly with a non-perfumed cream.

How should I massage my scar after Carpal Tunnel surgery?

This will help to flatten and soften the scar, and can help to separate the different layers of tissue underneath the skin. It also helps with sensitivity in the scar.

Using an un-perfumed cream, perform deep and firm circular movements across the scar line and the area immediately around it. This ensures that the scar does not stick to the underlying surface which then helps the structures under the skin to move freely. If you have any questions about caring for your scar, please speak to your Surgeon.

How often should I massage my scar?

You should massage your scar at least twice a day for a minimum of two minutes, for three months after your stitches are removed.

What are the benefits of massaging my scar?

Massaging the scar stimulates the area around it, helping to reduce redness and swelling and speeding up the maturation and flattening of the scar.

Scars with altered sensation will significantly improve with regular massage. If your scar is tender, it is very important to touch it.

Do's and Don'ts for general activity

Work

You may be off work for up to four weeks depending on your type of employment. Please discuss this with your surgeon.

Heavy lifting

You should not do any heavy lifting for the first four to six weeks after surgery.

Driving

You should not drive with stitches in your hand.

At home

Your ability to complete basic tasks will be reduced when you first go home. If you usually rely on your operated hand, your ability to prepare meals will be affected. You can do much to minimise any inconvenience by preparing before you come into hospital, for example:

- stock up on easy to prepare meals,
- make alternative arrangements for shopping, and
- make alternative arrangements for domestic tasks.

If you have any concerns about how you will manage at home, please let us know. Our Occupational Therapist may be able to offer some practical advice.

Further information

If you have any questions or concerns, please email **handsurgery@gjnh.scot.nhs.uk** or contact the orthopaedic clinic during office hours on 0141 951 5553. For out of hours, you should contact the Senior Nurse via the switchboard on 0141 951 5000.

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