Carpal Tunnel Release

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This fact sheet is for general information about this procedure only. It is not intended to be used as medical advice or to replace advice that your relevant healthcare professional would give you. If you have a particular medical problem, please consult a healthcare professional.

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What is carpal tunnel syndrome?

Carpal tunnel syndrome is a condition where there is increased pressure on a nerve that crosses the front of your wrist (the median nerve).

The median nerve runs through a tight tunnel on the front of your wrist, together with the tendons that bend your fingers.

If the tunnel becomes too tight it can cause pressure on the nerve, usually resulting in pain or numbness in the thumb, index and middle fingers. You may experience weakness in the affected hand.

What are the benefits?

You should get relief from pain and numbness in your hand. Any weakness should improve over time.

Are there any alternatives?

If your symptoms are mild, a wrist support worn at night often helps.

A steroid injection near the carpal tunnel can reduce the numbness or pain in most people but the symptoms usually come back after several weeks or months.

What will happen if I decide not to have the procedure?

Symptoms may improve if there is an underlying cause that is treated. In those people with no underlying cause, symptoms usually continue but can get better or worse for no known reason.

If the compression of the nerve is severe and you do not have any treatment for a long time, the nerve may become permanently damaged. This makes some of the muscles at the base of your thumb waste away and you may get permanent numbness in your hand. A carpal tunnel release procedure at this stage may not be able to put right the damage already done.

What does the procedure involve?

The procedure can usually be performed under a local anaesthetic and usually takes about 20 minutes.

Your surgeon will make a small cut on the palm of your hand. They will cut the tight ligament (the flexor retinaculum) that forms the roof of the carpal tunnel. This stops the nerve being compressed.

How can I prepare myself for the procedure?

If you smoke, stopping smoking now may reduce your risk of developing complications and will improve your long-term health.

Try to maintain a healthy weight. You have a higher risk of developing complications if you are overweight.

Regular exercise should help you prepare for the procedure, help you recover and improve your long-term health. Before you start exercising, ask the healthcare team or your GP for advice.

Speak to the healthcare team about any vaccinations you may need to reduce your risk of serious illness while you recover. When you come into hospital, practise hand washing and wear a face covering when asked.

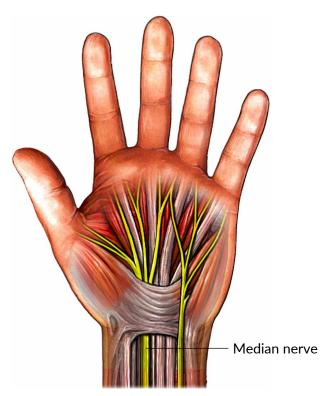
What complications can happen?

General complications of any procedure

- Bleeding
- Allergic reaction to the equipment, materials or medication
- Infection of the surgical site (wound)
- Chest infection

Specific complications of this procedure

- Numbness in your thumb, index and middle fingers
- Tenderness of the scar
- · Aching in your wrist
- Return of numbness and pain
- Severe pain, stiffness and loss of use of your hand
- Slow or incomplete recovery
- Failure to improve your symptoms



The carpal tunnel

Consequences of this procedure

- Pain
- Scarring of your skin

What happens after the procedure?

You should be able to go home the same day.

Keep your hand raised and bandaged for 2 days. It is important to gently exercise your fingers, elbow and shoulder to prevent stiffness.

Regular exercise should help you to return to normal activities as soon as possible. Before you start exercising, ask the healthcare team or your GP for advice.

Your symptoms may continue to improve for up to 6 months. However, it can take up to 12 months.

Summary

Carpal tunnel syndrome causes numbness in your thumb, index and middle fingers. A carpal tunnel release should improve your symptoms and prevent permanent nerve damage. Keep this information document. Use it to help you if you need to talk to the healthcare team.

Some information, such as risk and complication statistics, is taken from global studies and/or databases. Please ask your surgeon or doctor for more information about the risks that are specific to you, and they may be able to tell you about any other suitable treatments options.

This document is intended for information purposes only and should not replace advice that your relevant healthcare team would give you.

Acknowledgements

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