Sussex MSK Partnership





Carpal Tunnel Syndrome



Carpal tunnel syndrome is a common condition which affects one of the main nerves in the hand called the median nerve. The median nerve can be irritated or compressed at the wrist within the carpal tunnel.

The carpal tunnel is formed by the space between the bones of your wrist and a ligament that stretches across them. The tendons which enable you to bend your fingers also run through the carpal tunnel alongside the median nerve.

What are the Symptoms?

People can experience a range of different signs and symptoms from carpal tunnel syndrome. Common features include:

- Pain
- Pins and needles/tingling
- Numbness
- Weakness/reduced grip strength

Typically, these symptoms present in the thumb, index finger, middle finger and half of the ring finger. Sometimes the whole hand may be affected, and symptoms can travel up the arm. *The dark area shows the usual distribution of symptoms in the hand.*

Often the symptoms are worse at night and may feel better with moving or shaking your hand.



How Can I Help Myself?

Maintaining a straight/neutral position of the wrist may help to reduce the irritation on the nerve. Using a wrist splint at night can help you to do this while you sleep. If certain movement or tasks are aggravating your symptoms, try modifying your activity. Until your symptoms settle, you may need to avoid or take regular breaks from activities that involve sustained or repetitive movements (e.g driving, reading, office work, or DIY). When your symptoms improve, you can gradually return to your normal activities.

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What Exercises Can I Do?

Median Nerve Gliding Program

Exercises known as 'median nerve glides' may help to mobilise your nerve within the carpal tunnel. Your clinician will give you specific advice about how to do the following programme. If you are unsure, please ask them for further guidance. Please ensure you are sitting in a good posture doing exercises. The exercise program below is a continuous action moving slowly through the six positions. My Median Nerve Glide prescription is:

Position 2

Position 1

Wrist in neutral / straight position, make a fist as shown.



Position 4 Maintain position 3, open thumb away from hand.





Straighten fingers to open

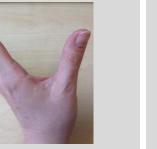
hand, wrist stays straight.

Position 5 Maintain position 4 while twisting hand around palm to ceiling.

Position 3 Maintain position 2, bend wrist backwards.



Position 6 Maintain position 5 and use your other hand to gently stretch thumb downwards.







Wrist Splinting

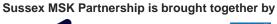
Your clinician will give you specific advice about wearing a wrist splint. Wrist splints are usually only worn at night. It may take several weeks before noticing a reduction in your symptoms.

The wrist splint will have a metal bar within a pocket. Remove the bar from the pocket and flatten/straighten it as much as possible. Then re-insert the metal bar into the pocket. **My Splint Prescription is:**



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Central



- When wearing the splint, the metal bar is positioned on the palm side of your hand and wrist.
- The top edge of the splint should be in the middle of your palm near the skin crease which runs across your hand.
- You should be able to bend and straighten your knuckles comfortably.
- The straps should be applied firmly but not tightly.
- The two edges of the splint should not have a gap.
- Remove the splint if you notice any rubbing, heat rash, discomfort or an increase in your symptoms.

When should I seek further help?

Follow guidance from your clinician. Seek help if your symptoms and/or function worsen (e.g more frequent, severe, or constant). If you develop constant numbness or weakness within your hand or wasting (reduced size/bulk) of the muscles at the base of your thumb within the palm of your hand, you must contact your clinician urgently. This may indicate more severe nerve compression which can result in irreversible nerve injury if left untreated. If you are unsure of what you should look out for, please speak to your clinician.



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