

# **Patientinformation**

# Carpal tunnel syndrome – following an operation

# Carpal tunnel syndrome (CTS)

The median nerve runs from your lower arm down to your hand through a passage (the carpal tunnel), which is made up of the carpal bone and a strong ligament that forms the upper part. Tendons also pass through this tunnel. These tendons are lined with a thin membrane that allows them to glide freely. Under certain circumstances this membrane could swell up and thicken. If the swelling is sufficiently extensive, it could press the nerve against the ligament. This could numbness, a tingling sensation, fumbling and pain.

## Operation

Carpal tunnel syndrome may require a relatively simple operative procedure since the space in the carpal tunnel is limited. During the operation the roof of the carpal tunnel, the ligament, is cut. This relieves the pressure on the median nerve.

# Following the operation

Problems often disappear quickly after surgery. However, in some cases nerve function returns slowly over a period of 6-12 months. In more complicated cases, a permanent residual condition can remain despite treatment.

Immediately after the operation, the hand is bandaged or put in plaster. It is important that following the operation the swelling goes down as quickly as possible and that finger movement is retained.



#### 2 days after the operation

To prevent swelling, perform the following exercise as soon as the anaesthetic has worn off. This exercise should be performed 10 times every hour or when you feel pressure building up.

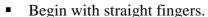
- Hold your hands at shoulder height
- Clench your hands tightly
- Stretch your arms upwards
- Stretch and spread your fingers



#### 3 days after the operation

To improve or retain finger movement and to prevent swelling, perform the following exercises three times a day, repeating each exercise 10 times on each occasion.

- Begin with straight fingers.
- Keep your knuckle joints straight.
- Bend the middle joints of your fingers and the joints nearest your fingertips.
- Open up your hand again.



- Bend your knuckle joints, the middle joints of your fingers and the joints nearest your fingertips as much as possible.
- Open up your hand again.



- Begin with straight fingers.
- Bend your knuckle joints and the middle joints of your fingers.
- Open up your hand again.





#### After the stitches have been removed

After the stitches have been removed, which is approximately two weeks after the operation, you can begin wrist exercises but you must take it easy. The following exercise often needs to be done 2-3 times a day.

- Place your lower arm against a table/armrest with your hand outside the edge.
- Clench your hand.
- Move your hand upwards as much as you can and then downwards – repeat 10 times.
- Make sure that your lower arm remains resting on the table.

Your hand must not be exposed to any heavy pressure for six weeks or so after the operation, by which time the ligament should have healed. You can then carry out more strenuous tasks, such as carrying heavy objects, gardening or working with tools.

It is not unusual for the scar to feel taut and sensitive when knocked or touched. This can last for some time after the operation. If that is the case, it could help if you massage the area around the scar several times a day.

If the nerve has been seriously affected, numbness could remain for some time after the operation. In that case, an elastic wrist support may need to be worn at night (tried out if necessary at the Central Occupational Therapy Department).

The length of sick leave depends on your job. The normal period of sick leave is 4-6 weeks, but if you have a job where you do not exert any pressure on your hand, you could be back at work after just a few days.

## Need help with exercises?

If you have any problems, you are welcome to contact the Central Occupational Therapy Department for an appointment.

#### Contact

Central department of occupational therapy and physiotherapy

Phone 033-616 12 79 (Borås)

0320-77 93 58 (Skene)

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