

# Greater Manchester Surgical Centre

An NHS and Netcare Healthcare UK Ltd Initiative



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## What You Need To Know About Carpal Tunnel Syndrome



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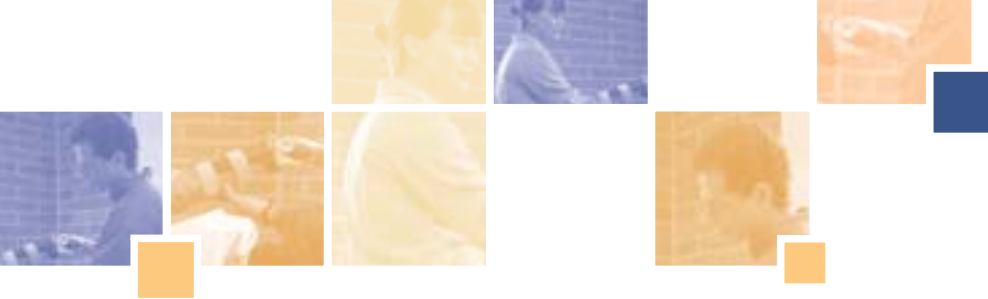


NHS Treatment Centre



NHS Treatment Centre





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## 1. What is Carpal Tunnel Syndrome?

'Carpal' is a medical term which refers to the wrist. A 'syndrome' is a combination of specific problems which doctors recognise as being a particular disease or disorder. The 'carpal tunnel' lies in your wrist. The tendons that extend from the muscles in your forearm which enable you to move your fingers, pass through this 'tunnel'.

The carpal tunnel contains an important nerve called the median nerve which controls some of the muscles which move the thumb. It also carries information back to the brain about sensations you feel in your thumb and fingers – particularly the index, middle and occasionally, the ring fingers.

Carpal Tunnel Syndrome occurs as a result of compression or pressure on the median nerve at the wrist joint. Many tendons pass through the carpal tunnel and so, if any swelling occurs, the large median nerve can easily be compressed causing Carpal Tunnel Syndrome.



The carpal tunnel in the wrist

Carpal Tunnel Syndrome may sometimes be alleviated through splinting and the use of medication. If these treatments fail to bring relief, an operation may be necessary. The condition can be surgically corrected by simply releasing the transverse carpal ligament to decompress or relieve the pressure on the pinched nerve. The surgery is usually performed on an outpatient/day basis.

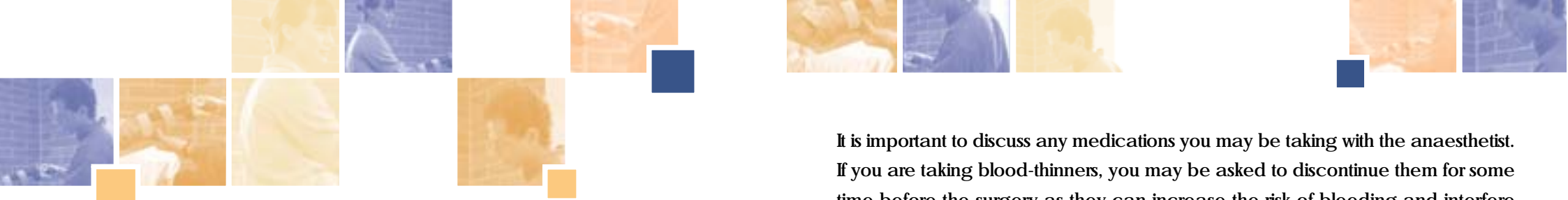
## 2. Symptoms of Carpal Tunnel Syndrome

These include:

- Weakness in one or both hands;
- Numbness or tingling in the thumb and the next two or three fingers of one or both hands;
- Numbness or tingling of the palm of the hand;
- Wrist or hand pain in one or both hands;
- Pain extending to the elbow;
- Impaired fine finger movements (co-ordination) in one or both hands;
- A weak grip or difficulty carrying bags (this is a common complaint); or
- Atrophy of the muscular bulge under the thumb (in advanced or chronic cases).

Individuals with an increased risk for developing Carpal Tunnel Syndrome include:

- Women between the ages of 40 and 60 years who may be experiencing hormonal changes associated with menopause;
- Pregnant women;
- People with certain types of arthritis, especially rheumatoid;
- Anyone who experiences a period of rapid weight gain;
- People who use their hands for repetitive movements (repetitive bending of the wrist) and forceful grasping;

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- Those with a thyroid gland imbalance;
  - Patients who have broken or dislocated bones in the wrist which have produced swelling; and
  - Sugar diabetes sufferers.

## 3. Before Surgery

### 3.1 Pre-assessment clinic

Before your surgery is scheduled, you will need to attend a pre-assessment clinic at the Greater Manchester Surgical Centre (GMSC). Here, you will be examined by an orthopaedic surgeon and an anaesthetist (the doctor who is responsible for administering the anaesthetic while you are undergoing your surgery).

The anaesthetist will discuss the various methods of anaesthesia and the one best suited to you and your procedure (refer to the GMSC's Anaesthetic brochure). Your post-operative pain management plan will also be discussed.

During your appointment, your full medical history will be taken. If necessary, the orthopaedic surgeon or anaesthetist may send you for further investigations such as blood tests, X-rays and/or an ECG. Don't be alarmed if you are required to undergo one or more of these investigations. The doctors have your wellbeing and best interests at heart and need to ensure that you are able to cope with the respective surgical procedure.

It is important to discuss any medications you may be taking with the anaesthetist.

It is important to discuss any medications you may be taking with the anaesthetist. If you are taking blood-thinners, you may be asked to discontinue them for some time before the surgery as they can increase the risk of bleeding and interfere with your surgery and recovery. For several days prior to your procedure, you will probably be asked to avoid any aspirin, ibuprofen and all herbal or homeopathic preparations. You should continue to take your normal medicines up to and including the day of surgery, unless the anaesthetist or surgeon has explicitly instructed you otherwise.

Once you fully understand what the procedure entails, you will be asked to sign an informed consent form in the presence of the orthopaedic surgeon.

### 3.2 Countdown to surgery

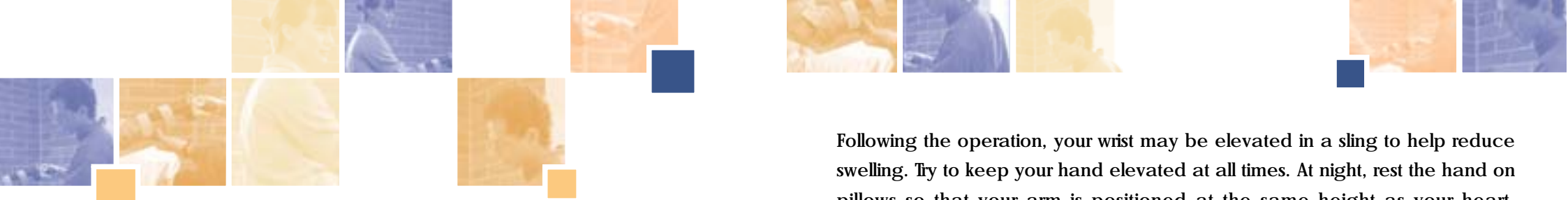
In the day/night leading up to your surgery, it is very important to refrain from eating or drinking anything for eight hours ('nil by mouth') before the operation, unless instructed otherwise by the doctor.

Remove your dentures and all nail polish. Ladies are requested not to wear any make-up on the day of surgery.

Leave all jewellery, money, watches and valuables with family members. The GMSC cannot be held responsible for your valuables.

Make sure you wear casual, comfortable clothing which is easy to put on and take off eg. drawstring-style sweat pants, boxer-style shorts, or loose items. You will be allocated a locker for storing your clothing while you are in surgery.

You may also wish to bring along some reading material or crossword puzzles to occupy your time while you are in the hospital.



You will not be allowed to leave the hospital alone or drive yourself home so arrange for a responsible adult to drive you to and from the hospital and have someone stay with you for at least 24 hours once you are back home.

## 4. The Surgery

You may be given either a local or general anaesthetic.

The surgeon will make a tiny incision (less than five centimetres long) in the palm of the affected hand. The exposed tissue beneath is then carefully cut through with a scalpel. A second incision reveals the transverse carpal ligament which is responsible for the compression of the median nerve. The ligament is cut and the incision in the palm is stitched closed. The body's healing process will rejoin the severed ends of the transverse carpal ligament and the resulting scar tissue shouldn't press so hard on the underlying nerve.

One or both wrists may be operated on at the same time. Surgery is performed with an inflated tourniquet on the arm to control bleeding.

## 5. After Surgery

If you had a general anaesthetic, your temperature, pulse, breathing, blood pressure and wound site will be checked frequently. You will only be allowed to eat or drink once you are fully awake and have no nausea.

Following the operation, your wrist may be elevated in a sling to help reduce swelling. Try to keep your hand elevated at all times. At night, rest the hand on pillows so that your arm is positioned at the same height as your heart.

Note: In order for us to maintain a high quality of care and prevent any possible risks, we respectfully request your permission to exhibit your details at your bedside. Initials, surname, doctor's name and possible risk factors eg. diabetes, will be displayed above your bed on a small white board.

You may find that your wrist is quite uncomfortable for a few days after the operation. Analgesia (pain relief) as prescribed by the doctor should help relieve any pain.


An occupational therapist will give you some important post-surgery hand exercises to do soon after your operation and once you are at home.

On your discharge, an out-patient appointment will be scheduled for you or arrangements will be made with the district nursing service.

## 6. At Home

Although you will be guided by the occupational therapist and orthopaedic surgeon, some general suggestions include:

- If you are discharged on the same day that you had the surgery, you will probably need some help around the house.
- Unless otherwise instructed by your doctor, you may remove the bulky dressings after 24 hours. Clean the wounds as instructed by the doctor and re-apply dry dressings to the area.

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- It is important to keep the hand dry until the stitches are removed by the doctor.
  - Continue your medication as ordered by the doctor.
  - Cold packs applied at regular intervals can help reduce post-operative swelling.
  - When you rest the hand, try and elevate it above the level of the heart.
  - You are encouraged to mobilise your fingers as early as possible to prevent adhesions of the tendons in the carpal tunnel and to control swelling.
  - Non-dissolving stitches will need to be removed in 10 to 14 days.

## 7. The Prognosis

Approximately one percent of individuals with Carpal Tunnel Syndrome develop permanent injury. Fortunately, the majority recover completely and can avoid re-injury by changing the way they do repetitive movements, the frequency with which they do the movements, and the amount of time they rest between periods when they perform the movements.

Complete recovery can take anywhere from several weeks to a year, depending on the severity of the damage to the nerve. Generally, the longer the symptoms persisted before you had your surgery and the more severely damaged the nerve appears at surgery, the longer the recovery time.

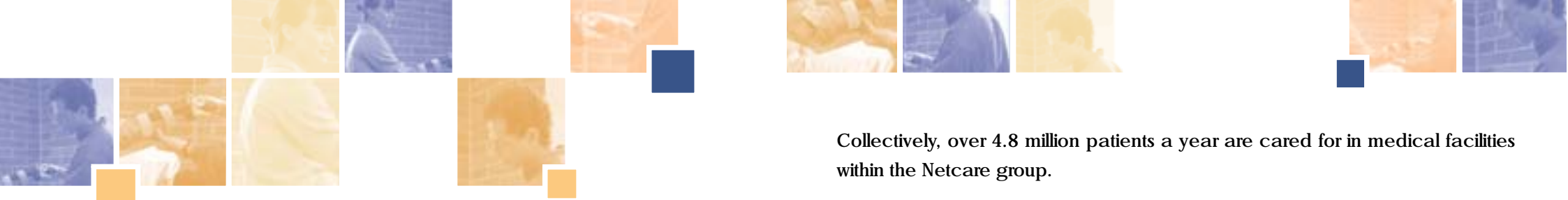
## 8. Possible Complications

Some potential complications of a carpal tunnel operation include:

- Partial or full wound opening;
- Infection;
- Temporary pain in the palm of the hand for approximately two months;
- Damage to the ulnar nerve;
- Injury to the surrounding blood vessels;
- The transverse carpal ligament isn't cut through completely which means a second operation is needed;
- Injury to the median nerve; and
- Laceration of the palmar cutaneous branch of the median nerve with painful neuroma formation is reported to be the most common complication of open carpal tunnel release.

The symptoms of Carpal Tunnel Syndrome should ease after surgery, but will not abate immediately and it may take between four to six weeks to feel the benefits of the surgery. However, pain around the incision site may still linger for some months. See your doctor if you are concerned about the degree of discomfort.

If you notice any undue swelling, redness or heat in the operated area, see the doctor immediately as these symptoms could indicate an infection. If the median nerve has been compressed for a long time, then recovery of fingertip sensation may take from between 12 to 18 months.



Contact the GMSC Advice Line on 0161 746 2828, call your local general practitioner, or go to the nearest Accident and Emergency Centre if you experience:

- A fever;
- Increased and severe pain despite taking painkillers; or
- Pus or increasing redness and tenderness in the area of the cut.

## 9. GMSC Advice Line

The staff at the GMSC are available to assist you at any time. You can reach them by calling: 0161 746 2828.

## 10. About Netcare and the NHS Partnership

### 10.1 Netcare

Network Healthcare Holdings Limited (Netcare) is one of the largest integrated private healthcare organisations in South Africa. Listed on the Johannesburg Securities Exchange (JSE) in 1996, the Netcare group owns and manages 45 private hospitals and clinics, 61 specialised medical centres and 53 Medicross Family Medical and Dental Centres throughout South Africa.

In total, Netcare hospitals comprise 7 200 beds, 319 operating theatres; all of which are supported by over 2 200 medical practitioners in private practice.

Collectively, over 4.8 million patients a year are cared for in medical facilities

Collectively, over 4.8 million patients a year are cared for in medical facilities within the Netcare group.

Specialised hubs of clinical excellence focusing on disciplines such as cardiology, cardiothoracic surgery, neurosurgery, orthopaedic surgery, gastroenterology, oncology, ophthalmology, renal dialysis and organ transplantation, are located in numerous Netcare hospitals around the country.

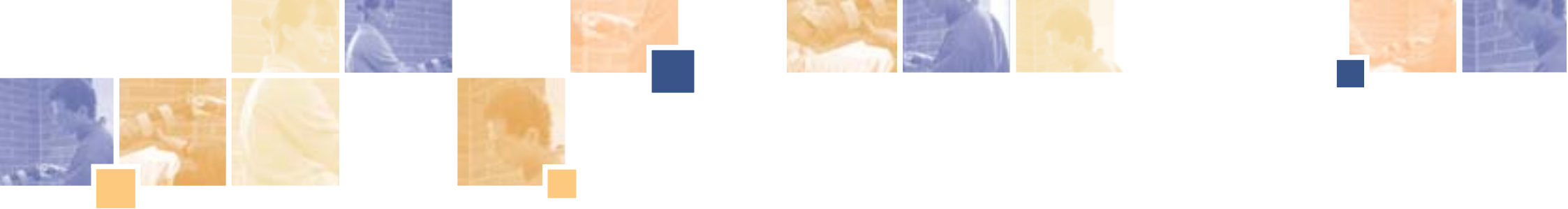
### 10.2 The Netcare/NHS Treatment Centre Partnership

During the past two years, Netcare has participated in four successful NHS Waiting List Initiatives which were specific to ophthalmology; orthopaedic surgery; and ear, nose and throat surgery.

Committed to reducing waiting times for those needing surgical procedures and to improving choice and access to facilities; in 2003, the NHS launched its Treatment Centre (TC) initiative, a programme designed to provide rapid, safe and effective medical treatment to patients on Waiting Lists.

Against the backdrop of its previous experience with NHS Waiting List Initiatives, Netcare was selected as the successful bidder for two such five-year TC initiatives; the first of which is based on a mobile ophthalmology chain that will perform 44 000 cataract procedures over five years. The second TC initiative will see 45 000 orthopaedic and general surgery procedures performed at the newly-constructed Greater Manchester Surgical Centre (GMSC) over the five-year period.

The Netcare/NHS partnership upholds the NHS' principle of delivering excellent



The Netcare/NHS partnership upholds the NHS' principle of delivering excellent service free at the point of access. Providing the highest possible quality of care while maintaining patient dignity at all times, is a fundamental objective of the partnership.

Netcare's medical team consists of highly skilled, experienced and professionally qualified consultant surgeons, anaesthetists and nursing personnel, all of whom are supported by administrative, technological and patient care teams.

We dedicate our efforts to providing you with quality care in a safe, efficient and caring environment.