

Script – Print – No Bones About It

Carpal tunnel syndrome can be a real pain

If you ever feel numbness, tingling, weakness or pain in your wrist or hand, you could have carpal tunnel syndrome (CTS).

CTS is a common neurological disorder that happens when the median nerve, which runs from your forearm into the palm of the hand, is pressed or squeezed at the wrist. The median nerve provides feeling to your thumb and first three fingers and helps you move your thumb.

It's not really known what causes CTS but it typically only happens in adults and women are three times more likely to get it than men because their wrists are smaller. Many times it's a combination of things that impact the structure of the wrist. It can be an injury to the wrist, or a condition that can affect the nerves, joints and other parts of the wrist, such as: diabetes, rheumatoid arthritis or a cyst or tumor.

According to the Rheumatology Research Foundation, between 4 million and 10 million people are impacted by CTS.

“People who get carpal tunnel – sometimes it's just genetic,” says BreAnne Gendron, an advanced practice registered nurse (APRN) with OSF HealthCare. “You were born with the trait or predisposition to developing it. Also, if you do a job that requires a lot of repetitive movements with your wrist, or something like where you're holding on to a machine with a lot of vibration, that can cause irritation in the carpal tunnel and inflammation in there and lead to it.”

Repetitive movement with your hand and wrist such as what happens when you play golf, gardening, knitting or working on an assembly line can also aggravate the injury. Sleeping on a bent wrist can also cause CTS.

Over time, it will get worse,” says Gendron. “You'll notice more tingling and numbness, some pain, people will lose the muscle in the base of the thumb. They'll have some muscle atrophy over time and instead of just irritating that nerve, it will cause some nerve damage. And even if they do have treatments to resolve the carpal tunnel issue, those symptoms may never fully resolve.”

Gendron recommends starting treatment as soon as possible. That may mean rest and medicine to reduce swelling and pain.

And if your symptoms are quite severe, surgery may be the best option. According to the Bureau of Labor and Statistics and the National Institute for Occupational Safety and Health (NIOSH), CTS surgery is the second most common type of surgery – more than 230,000 procedures are performed each year. The surgery is called carpal tunnel release and involves cutting a ligament to prevent damage to the nerve. Recovery typically takes two to three weeks but can take longer.

“Carpal tunnel can be treated as simply as wearing a wrist brace at night or coming to see me to get a steroid injection into your carpal tunnel,” says Gendron. “Your symptoms resolve and you do well for a while. The end-all be-all solution for carpal tunnel is surgery. But surgery isn't the only answer because we can sometimes manage it non-operatively.”

While there's nothing you can do to prevent carpal tunnel, there are ways to limit the damage – use good posture to keep your wrists in a natural position, take breaks from work and change up your routine when you can.

And listen to your doctor when it comes to following a treatment plan.

“If it's waking you up at night and it's affecting how well you're sleeping than you should visit your doctor,” says Gendron. “The easiest thing we tell people is to try a wrist splint just to keep your hands straight when you sleep. It's usually when you curl in at night that it causes that tingling to happen so that's the easiest first step for people. But if it's happening more and more, we want to seek treatment to prevent damage to your nerve.”

For more information on CTS treatment, visit [OSF HealthCare](#).