

Knowing about your carpal tunnel syndrome

What is carpal tunnel syndrome, how might it affect you and what can you do about it? This information sheet helps answer these and other questions you might have.

What is carpal tunnel syndrome?

It's a condition that affects the carpal tunnel - a narrow passage in the wrist, formed by the wrist bones (which make up the sides of the tunnel) and a ligament running across the top of the wrist bones (the tunnel roof). An important nerve to the hand - called the median nerve - passes through the tunnel, along with tendons and blood vessels.

Carpal tunnel syndrome (CTS) happens when the median nerve is squeezed within the tunnel. This can have several effects or 'symptoms'.

The symptoms can include tingling, numbness and burning pain in the thumb, fingers and hand. You may also notice that:

- · you're clumsy when handling objects
- your grip is weak
- you have a feeling of swelling of the wrist.

Often the symptoms are worse at night.

Finding out if you have carpal tunnel syndrome

It's important to see a doctor to get a diagnosis (ie, find out if you have CTS). This is because there are lots of other possible reasons for numbness and tingling in the hand.

Your doctor may sometimes recommend a test called a 'nerve conduction study' to help make the right diagnosis. This test is usually done by a neurologist – a doctor who specialises in conditions affecting the nerves.

The result of the test, together with your symptoms, helps your doctor confirm the diagnosis.

How to manage carpal tunnel syndrome

What to do first

If you have CTS, the first things you can do to try to reduce your symptoms and pain are:

- change the usual activities you do every day - this may help you pinpoint and avoid particular activities that make your symptoms worse (you should still try to keep active though)
- wear a splint (this is like a stiff bandage that you wear on your wrist)
- take simple pain relief medication.



Your pharmacist and GP can help you with this. Eventually, your CTS may settle down, although this may take many months.

Further information on carpal tunnel syndrome is available online at

www.acc.co.nz

What to do next

If your CTS doesn't get better by itself, your doctor may suggest the following options:

- an injection of steroid into the carpal tunnel – you may find this provides good relief for a while, but it may not provide a permanent solution
- surgery to release the ligaments which form the roof of the tunnel – this is more likely to provide a permanent solution.

CTS surgery has a good reputation for being safe and effective. Most people recover quickly from surgery and find that their pain and other symptoms are completely relieved.

After ten days the wound has usually healed and you can start using your hand a little.

After four to six weeks, under guidance from your surgeon, you can usually get back to most activities.

Who's most at risk of developing CTS?

For many people with CTS no cause can be found. Doctors believe that some medical conditions may be linked with CTS. For example, if you're overweight or you have diabetes, you may be more likely to develop CTS. Pregnant women may also develop CTS, which often settles after childbirth.

In some cases, CTS can result from very heavy use of the hands at work. For example, work tasks such as fish filleting and lamb boning – which involve frequent, forceful and strained movements of the wrist – may lead to CTS if you spend a lot of time doing these tasks.

Normally, using the keyboard and mouse on your computer won't cause carpal tunnel syndrome. However, if you have CTS developing, even doing light work with your hands can make your pain and symptoms worse.

Does ACC cover CTS?

ACC can only cover CTS if it's been caused by features of the tasks you do at work.

Your doctor can make a claim for you. ACC will then contact you for more information – such as your work and medical history - to help us make a decision on your claim. If you have CTS and you think your work may have caused it, talk to your doctor.

Can I still work with CTS?

Whatever the cause of CTS, many people find that it interferes with their work. So it's important to get advice from your doctor on how to manage your work activities.

It's also a good idea to discuss any problems you're having doing work tasks with your employer. Where possible, employers will often find you other duties to do. Employers are often very helpful if they can see that you're taking care of your condition and seeking help to manage it.

This information is not intended as a substitute for professional medical care or advice.

Provided for your help and support by ACC freephone **0800 101 996**.