

Orthopaedics

Carpal Tunnel Surgery Patient Information



Carpal Tunnel Surgery

Whilst you are waiting for your surgery, you may find it useful to read this patient leaflet which we hope you will find helpful. The leaflet has been developed by the expert clinicians carrying out your care. This booklet explains what Carpal Tunnel surgery is, what the benefits and possible complications of surgery are, recovery after surgery and much more.

The COVID-19 pandemic has had a significant impact on the NHS ability to provide routine elective services. We recognise that patients are waiting longer than we would all like and it is not always possible to identify when treatment will take place. This document provides you with information on how you are able to support yourself while waiting to attend the hospital. The guidance has been written by clinicians who are responsible for your care.

Guidance for Patients

Whilst you await your surgery, there are many things that you can do to support your health and wellbeing. It is important to continue with the exercises that your GP and hand therapist has recommended to you. Wrist splints at night are often helpful too.

The Shrewsbury and Telford Hospital NHS Trust website includes a variety of useful information including health and support with mental wellbeing, addiction, guidance for parents and carers, exercise and practical help that you may find useful. You can find the website using this link: www.sath.nhs.uk

Further links which may help you manage your condition whilst you await treatment:

www.patientaccess.com/ (Connect to your GP services online)

www.nhs.uk/mental-health/self-help/

www.nhs.uk/conditions/

What should I do if my health is deteriorating?

If you have an appointment, and you feel that your symptoms are worsening, then please call our switchboard numbers. If you are yet to receive your outpatient clinic appointment, and you feel that your symptoms are worsening, then see your GP.

Further resources for helping patients manage whilst waiting for treatment;

<https://escape-pain.org/>

<https://weareundefeatable.co.uk/ways-to-move/five-in-five>

<https://www.versusarthritis.org/>

https://central.movingmedicine.ac.uk/wp-content/uploads/sites/5/2021/03/MSK_Patient_info_leaflet_2020.pdf

What is carpal tunnel syndrome?

Carpal tunnel syndrome is a condition where there is increased pressure on a nerve that crosses the front of your wrist (the median nerve).

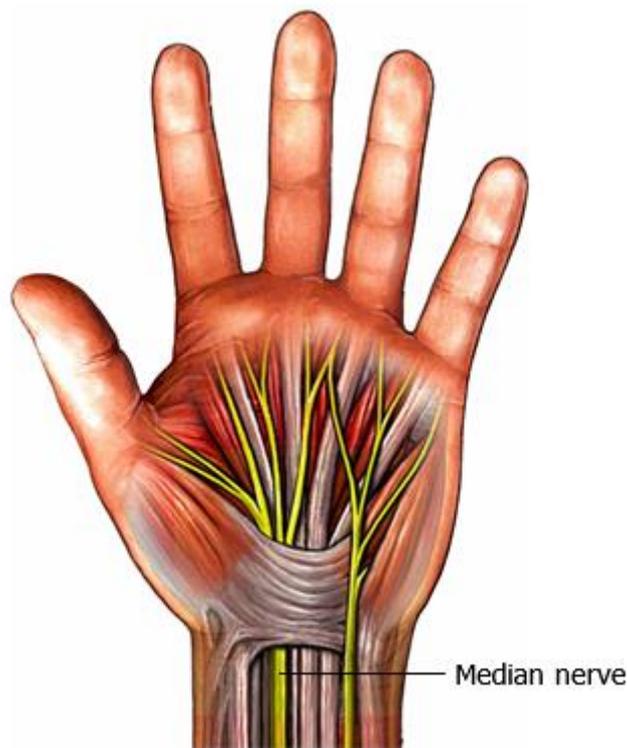
Your surgeon has suggested an operation called a carpal tunnel release. However, it is your decision to go ahead with the operation or not.

This document will give you information about the benefits and risks to help you to make an informed decision. If you have any questions that this document does not answer, it is important that you ask your surgeon or the healthcare team.

Once all your questions have been answered and you feel ready to go ahead with the procedure, you will be asked to sign the informed consent form. This is the final step in the decision-making process. However, you can still change your mind at any point.

How does carpal tunnel syndrome happen?

The median nerve runs through a tight tunnel on the front of your wrist, together with the tendons that bend your fingers.



If the tunnel becomes too tight it can cause pressure on the nerve, usually resulting in pain or numbness in the thumb, index and middle fingers. The symptoms are often worse at night.

If your symptoms are less typical, your surgeon may recommend further tests to confirm the diagnosis.

Carpal tunnel syndrome is more common in women than men and is sometimes associated with arthritis, obesity, pregnancy, wrist fractures, diabetes or thyroid problems. However, for most people there is no particular cause.

What are the benefits of surgery?

You should get relief from pain and numbness in your hand.

Are there any alternatives to surgery?

If your symptoms are mild, a wrist support worn at night often helps.

A steroid injection near the carpal tunnel can reduce the numbness or pain in most people but the symptoms usually come back after several weeks or months.

If the symptoms are severe or these simple treatments have failed, surgery is usually recommended.

What will happen if I decide not to have the operation?

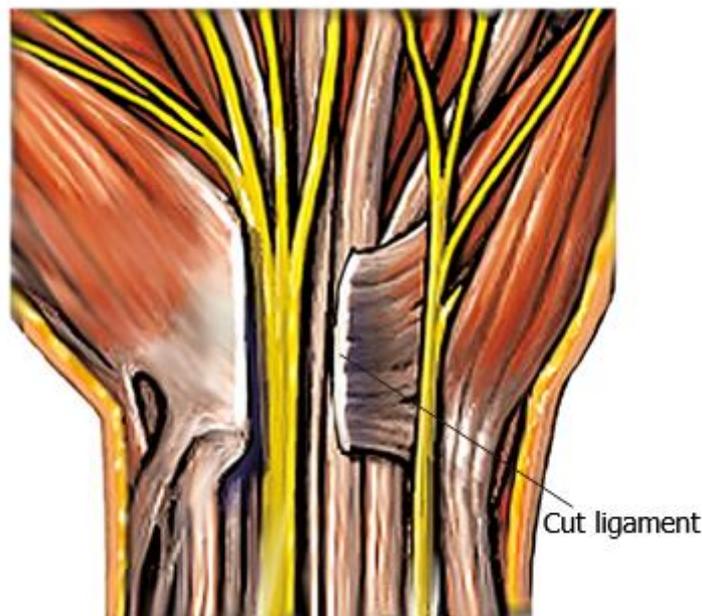
Symptoms may improve if there is an underlying cause that is treated. In those people with no underlying cause, symptoms usually continue but can get better or worse for no known reason.

If the compression of the nerve is severe and you do not have any treatment for a long time, the nerve may become permanently damaged. This makes some of the muscles at the base of your thumb waste away and you may get permanent numbness in your hand. A carpal tunnel release operation at this stage may not be able to put right the damage already done.

What does the operation involve?

The healthcare team will carry out a number of checks to make sure you have the operation you came in for and on the correct side. You can help by confirming to your surgeon and the healthcare team your name and the operation you are having.

The operation can usually be performed under a local anaesthetic and usually takes about 20 minutes.



Your surgeon will make a small cut on the palm of your hand. They will cut the tight ligament (the flexor retinaculum) that forms the roof of the carpal tunnel. This stops the nerve being compressed.

Your surgeon will close your skin with stitches.

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The contents of this information has been reviewed and approved by the Orthopaedic Committee of Royal Shrewsbury & Telford Hospital.

What should I do about my medication?

Make sure your healthcare team knows about all the medication you take and follow their advice. This includes all blood-thinning medication as well as herbal and complementary remedies, dietary supplements, and medication you can buy over the counter.

What can I do to help make the operation a success?

If you smoke, stopping smoking now may reduce your risk of developing complications and will improve your long-term health.

Try to maintain a healthy weight. You have a higher risk of developing complications if you are overweight.

Regular exercise should help to prepare you for the operation, help you to recover and improve your long-term health. Before you start exercising, ask the healthcare team or your GP for advice.

You can reduce your risk of infection in a surgical wound.

- Try to have a bath or shower either the day before or on the day of the operation.
- Keep warm around the time of the operation. Let the healthcare team know if you feel cold.
- If you are diabetic, keep your blood sugar levels under control around the time of your procedure.

If you have not had the coronavirus (Covid-19) vaccine, you may be at an increased risk of serious illness related to Covid-19 while you recover.

Speak to your doctor or healthcare team if you would like to have the vaccine.

What complications can happen?

The healthcare team will try to reduce the risk of complications.

Any numbers which relate to risk are from studies of people who have had this operation. Your doctor may be able to tell you if the risk of a complication is higher or lower for you.

Some complications can be serious.

You should ask your doctor if there is anything you do not understand.

Your surgeon or anaesthetist will be able to discuss with you the possible complications of having an anaesthetic.

General complications of any operation

- Bleeding during or after the operation. This is not usually serious but can cause a painful swelling (haematoma) that takes 1 to 2 weeks to settle.
- Allergic reaction to the equipment, materials or medication. The healthcare team is trained to detect and treat any reactions that might happen. Let your doctor know if you have any allergies or if you have reacted to any medication or tests in the past.
- Infection of the surgical site (wound) (risk: less than 1 in 20). It is usually safe to shower after 2 days if you keep your wound dry and covered. Let the healthcare team know if you get a high temperature, notice pus in your wound, or if your wound becomes red, sore or painful. An infection usually settles

with antibiotics but you may need special dressings and your wound may take some time to heal. In some cases another operation might be needed. Do not take antibiotics unless you are told you need them.

- Chest infection. If you have the operation within 6 weeks of catching Covid-19, your risk of a chest infection is increased (see the 'Covid-19' section for more information).

Specific complications of this operation

- Numbness in your thumb, index and middle fingers caused by damage to the median nerve or one of its branches during the operation. This can be temporary (risk: 1 in 100) or permanent (risk: 1 in 600).
- Tenderness of the scar is common for 6 weeks and usually gets better. It can be a permanent problem (risk: less than 1 in 20).
- Aching in your wrist when using your hand (risk: 1 in 25). This usually settles with time.
- Return of numbness and pain caused by scar tissue that forms (risk: 1 in 17). You may need another operation to release the nerve again.
- Severe pain, stiffness and loss of use of your hand (complex regional pain syndrome - CRPS). The cause is not known. You may need further treatment including painkillers and physiotherapy. Your hand can take months or years to improve. Sometimes there is permanent pain and stiffness.

Covid-19

A recent Covid-19 infection increases your risk of lung complications or death if you have an operation under general anaesthetic. This risk reduces the longer it is since the infection. After 7 weeks the risk is no higher than someone who has not had Covid-19. However, if you still have symptoms the risk remains high. The risk also depends on your age, overall health and the type of surgery you are having.

You must follow instructions to self-isolate and take a Covid-19 test before your operation. If you

have had Covid-19 up to 7 weeks before the operation you should discuss the risks and benefits of delaying it with your surgeon.

Consequences of this procedure

- Pain. The cut is usually small and not too painful once the anaesthetic has worn off. The healthcare team will give you medication to control the pain.
- Scarring of your skin. As the cut lies in one of your skin creases, the scar usually becomes almost invisible over time.

How soon will I recover?

After the operation you will be transferred to the recovery area and then to the ward. You will have a bandage on your hand and may need to wear a sling.

You should be able to go home the same day. However, your doctor may recommend that you stay a little longer.

If you are worried about anything, in hospital or at home, contact the healthcare team. They should be able to reassure you or identify and treat any complications.

Returning to normal activities

If you had sedation or a general anaesthetic and you do go home the same day:

- a responsible adult should take you home in a car or taxi and stay with you for at least 24 hours;
- you should be near a telephone in case of an emergency;
- do not drive, operate machinery or do any potentially dangerous activities (this includes cooking) for at least 24 hours and not until you have fully recovered feeling, movement and co-ordination; and
- do not sign legal documents or drink alcohol for at least 24 hours.

Your surgeon will tell you when you can return to normal activities. Keep your hand raised and bandaged for 2 days. It is important to gently exercise your fingers, elbow and shoulder to prevent stiffness.

After 2 days the dressing can be reduced but keep your wound clean and dry until any stitches come out. The healthcare team will tell you if you need to have any stitches removed.

Regular exercise should help you to return to normal activities as soon as possible. Before you start exercising, ask the healthcare team or your GP for advice.

Do not drive until you can control your vehicle, including in an emergency, and always check your insurance policy and with the healthcare team.

Ask your healthcare team if you need to do a Covid-19 test when you get home.

The future

For 3 in 4 people, symptoms of carpal tunnel syndrome improve quickly. However, recovery can be slower or less complete because of damage caused by pressure on the nerve before the operation.

Your symptoms may continue to improve for up to 6 months. If you had wasting of the muscle at the base of the thumb before the operation, this is less likely to get better. However, the operation should improve the pain and will prevent further damage to the nerve.

The operation is a success in 7 in 8 people.

Summary

Carpal tunnel syndrome causes numbness in your thumb, index and middle fingers. A carpal tunnel release should improve your symptoms and prevent permanent nerve damage.

Surgery is usually safe and effective but complications can happen. You need to know about them to help you to make an informed decision about surgery. Knowing about them will also help to detect and treat any problems early.

My Planned Care Patient Information Platform

For urgent health advice about physical or mental health, when it's not an emergency, please call 111 from any landline or mobile phone. You can also visit www.nhs.uk. The NHS 111 service is available 24 hours a day, seven days a week.

Life Threatening Emergencies

If you have severe bleeding, breathing difficulties or chest pains – please dial 999 immediately.

Contact Us

If you have any concerns or questions that you need support with, our Patient Advice and Liaison Service (PALS) is a great place to start.

You can call 01743 261691 for the Royal Shrewsbury Hospital or 01952 641222 ext 4382 for the Princess Royal Hospital.

They will listen to you and advise you how they can help.

If you would prefer to get in touch by email, please contact sath.pals@nhs.net