

How Soon Can I Go Back to Work?

If your job doesn't involve heavy work, you can go back as soon as you feel ready. If it does, or if your job involves handling food or nursing sick patients, you should take a full week off. You will recover quicker the sooner you return to normal activities including work. Most patients can do all their normal work by two weeks after the operation; if you have heavy manual work, or work that involves a lot of repetitive hand and finger movements, you may need to start gently and it may take three to four weeks to recover fully, but it is still better to return to work early. Most patients return to driving at one to two weeks after operation, once they are fully in control of the car

Which doctor will I see?

You will see one of the clinical team:

Mr Michael Taylor FRCS Orth, Consultant Orthopaedic Surgeon
Dr Philip Bohannon MB BChir, GP with Special Interest in CTS
Dr Hein Leonhardt MB ChB, GP with Special Interest in CTS
Dr Laurel Spooner MRCP MRCGP, GP with Special Interest in CTS

How do I Get There?



To book an appointment, contact us at:

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CARPAL TUNNEL SERVICE

Diagnosis and treatment of Carpal Tunnel Syndrome

What is it?

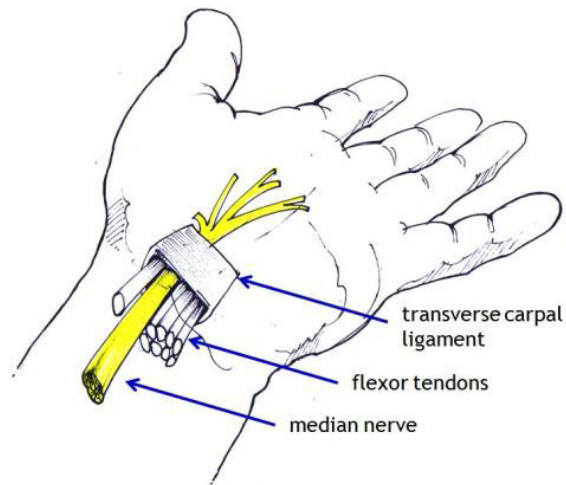
Carpal Tunnel Syndrome (CTS) is a condition where the median nerve is compressed where it passes through a short tunnel at the wrist. The tunnel contains the tendons that bend the fingers and thumb as well as the nerve (see diagram on next page).

CTS commonly affects women in middle age but can occur at any age in either sex. CTS can occur with pregnancy, diabetes, thyroid problems, rheumatoid arthritis and other less common conditions, but most sufferers have none of these.

CTS may be associated with swelling in the tunnel which may be caused by inflammation of the tendons, a fracture of the wrist, wrist arthritis and other less common conditions. In most cases, the cause is not identifiable.

What are the symptoms?

The main symptom is altered feeling in the hand, affecting the thumb, index, middle and ring fingers; it is unusual for the little finger to be involved. Many people describe the altered feeling as tingling. Tingling is often worse at night or first thing in the morning. It may be provoked by activities that involve gripping an object, for example a mobile telephone or newspaper, especially if the hand is elevated.



In the early stages, numbness and tingling are intermittent and sensation will return to normal. If the condition worsens, the numbness and tingling may become continuous, together with weakness and wasting of the muscles at the base of the thumb.

Sufferers often describe a feeling of clumsiness and drop objects easily. CTS may be associated with pain in the wrist and forearm. In some cases, nerve conduction tests are needed to confirm the diagnosis.

Do I need a Referral?

Yes. If you have the symptoms described, you should go to see your GP. If the symptoms are not severe your GP may be able to treat you satisfactorily. But if it is not clear what is causing your symptoms or if GP treatment is not appropriate or does not cure your symptoms, the GP will refer you to a specialist clinic. We can only see patients who have been referred by their GP.

When can I get an appointment?

You can usually get an appointment for a first consultation in 3-6 weeks. You may need 2 or 3 appointments at the clinic to complete your treatment. The service is free for NHS patients living in North East Essex.

What is the treatment?

Non-surgical treatments include the use of splints, especially at night, and steroid injection into the carpal tunnel. CTS occurring in pregnancy often resolves after the baby is born.

Surgery is frequently required. Although CTS often affects both hands, it is best to operate on one at a time. If you need a second operation we can arrange this a few weeks later.

The operation involves opening the roof of the tunnel to reduce the pressure on the nerve (see diagram: the roof of the carpal tunnel is called the transverse carpal ligament). The operation is performed under a local anaesthetic. Afterwards the site of the operation is covered by a small adhesive dressing. You will not need a bandage or a sling. The stitches in your hand will be removed at our clinic 8 days after your procedure or with your consent we may use stitches which dissolve and do not necessitate a return to the clinic. In this case the follow-up will be done by telephone.

The outcome is usually a satisfactory resolution of the symptoms. Night pain and tingling usually disappear within a few days. In severe cases, improvement of constant numbness and muscle weakness may be slow or incomplete. It generally takes about three months to regain full strength and a fully comfortable scar, but the hand can be used for light activities from the day of surgery. The more you use your hand after the operation, the faster it will recover.

If I need an Operation, How Long will it Take?

If the conclusion from your first appointment is that you need an operation, we explain the procedure and answer your questions. If you are happy to proceed, you will then be able to book a second appointment for your operation. On average the operation takes about 25 minutes but you will be at the surgery about an hour in all. You should bring someone with you to drive you home afterwards.

Will It Hurt?

When the local anaesthetic is injected into the skin of the hand, you will feel some discomfort, but as soon as it takes effect, you should feel no pain. Afterwards you may be sore for a couple of days, and you might want to take a mild painkiller. You will be provided with complete instructions about what to do after surgery.