



Royal Berkshire  
NHS Foundation Trust

# Advice following carpal tunnel surgery

Adult Day Surgery Unit

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**This leaflet will give you advice on how to look after your hand following surgery for carpal tunnel syndrome. If there is anything you do not understand or if you have any questions or concerns, please feel free to discuss them with your nurse.**

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## **What is carpal tunnel syndrome?**

The bones of the wrist are known as the carpus and they form a gutter shape. Across the palmar surface is a tough band of tissue, which is known as the flexor retinaculum in the UK or the transverse carpal ligament in the USA; colloquially called the 'roof of the tunnel'. One of the main nerves to the hand, the 'median nerve', passes through the tunnel. Typically, the median nerve supplies sensation to the thumb, index, middle and half of the ring finger. It supplies a variable number of the small hand muscles especially to the thumb.



The classic symptoms of carpal tunnel syndrome described are episodes of numbness and tingling affecting the hand on certain specific activities, such as holding a telephone or book, or when driving. It causes night-time disturbance, waking people up and relief is frequently achieved by shaking the hands or hanging them out of the bed. The amount of pain experienced varies enormously from none, to intense, almost unbearable, pain.

Carpal tunnel decompression involves cutting the roof of the tunnel to ease the pressure on the median nerve. It is usually carried out under local anaesthetic. You will have limited use of your hand for work for a few weeks after the operation. A small scar on the front of the wrist will remain.

## Aftercare advice

- For the first two days following your surgery, keep your arm up in a sling during the day and support it on pillows at night.
- Take some painkillers (such as Paracetamol or Ibuprofen) when you arrive home and top them up before going to bed on the first night. After that, take them as necessary without exceeding the maximum dose.
- Keep the dressing dry. Cover the dressing with a plastic bag or waterproof material when you shower or take a bath.
- Keep the fingers mobile to avoid stiffness.
- You will be advised when to go and see your practice nurse to have the bandage removed.
- The stitches are dissolvable so nothing should need to be removed.
- Please arrange for the GP practice nurse to remove your stitches on \_\_\_\_\_.
- You can return to light activity, driving and work (without any lifting) when your wound has healed. However, if you experience pain during an activity please stop. No heavy manual work for at least 4-6 weeks.
- Do not carry heavy weights or do any lifting for 4-6 weeks.

After \_\_\_ days, see your practice nurse for removal of the bandages. Leave all the dressings on until you see the practice nurse.

## **During the first 24 hours following your discharge**

If you have any further concerns about your orthopaedic surgery, please telephone Redlands Ward on 0118 322 7485.

Alternatively, for emergencies only, please telephone the Royal Berkshire Hospital switchboard on 0118 322 5111 and ask for the on-call orthopaedic doctor.

After 24 hours, please seek advice from your GP

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**Please ask if you need this information in another language or format.**

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