



Carpal Tunnel Syndrome

Have you ever noticed a numbing or tingling sensation in your fingers or hands? Maybe you've heard of carpal tunnel syndrome and wondered whether it could be the cause of your discomfort. With such an ominous-sounding name, though, this condition may be a *firsthand* experience you're inclined to ignore.

What exactly is carpal tunnel syndrome? First, here's a brief anatomy lesson. Inside your wrist, are eight carpal tunnel bones that form a tunnel. Running through the tunnel is the large median nerve, as well as bands of connective tissue called tendons. If the carpal tunnel becomes too small or if tendons enlarge, this can put pressure on the median nerve.

This pressure causes symptoms that "speak to the hand" (and fingers)—pain, numbness, burning, or tingling. Symptoms usually develop gradually, often appearing first at night after sleeping with wrists flexed. With time, carpal tunnel syndrome can reduce your muscle strength, making it hard to grasp small objects or do other manual tasks. If not treated, it can lead to permanent nerve or muscle damage.

Along with many other people, you may have been led to believe that carpal tunnel syndrome is the result of long hours at a keyboard. But computers aren't the culprit. A 2001 Mayo Clinic study found that up to 7 hours daily at a keyboard does not increase the risk of developing this condition. As it turns out, people who work on assembly lines are actually three times more likely to develop carpal tunnel syndrome than those who work at a computer.

It's true that repetitive, forceful motions with a bent wrist may *contribute* to carpal tunnel syndrome, but studies don't confirm they're the *cause*. Recent evidence suggests that simply being born with a smaller carpal tunnel makes you more prone to problems with your median nerve.

Other factors that may contribute include regular use of vibrating hand tools, wrist injuries, or underlying medical problems such as arthritis or diabetes. Your risk for carpal tunnel syndrome is also greater if you're a woman, middle-aged, obese, or a smoker.

If you're suffering from wrist and hand symptoms, don't ignore them. Your doctor can do a physical exam and one or more tests to rule out other problems, confirm a diagnosis, and plan treatment.

Treating any underlying disease such as diabetes will be one of the first steps in your treatment plan. Your doctor may also suggest that you take frequent rests at work, apply cool packs, and learn stretching and strengthening hand exercises. And using a neutral hand and wrist position—sometimes with the help of a splint—can take pressure off your median nerve. Some people also find relief from complementary therapies, such as chiropractic, acupuncture, or yoga.

Your doctor may recommend medications to ease pain and swelling. These might include nonsteroidal anti-inflammatories, diuretics, or corticosteroids. Feel free to ask me any questions you have about them. If your symptoms last longer than six months, your doctor may recommend surgery to enlarge the carpal tunnel.



If you have any questions please feel free to contact me @ 873-3244 or mcglynnrx@tds.net

Thanks,
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