

Carpal Tunnel Syndrome in Pregnancy and Postnatally

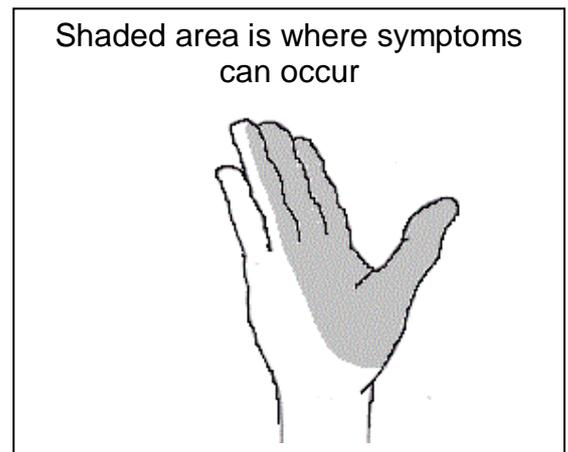
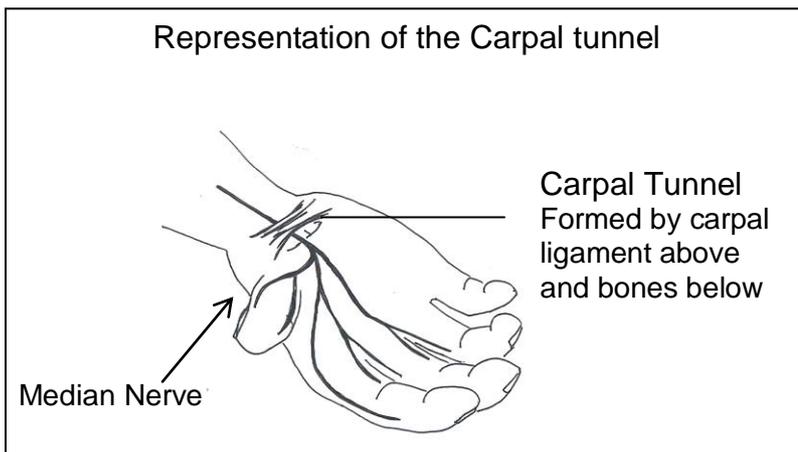
This leaflet offers more information about carpal tunnel syndrome. If you have any further questions or concerns, please speak to the staff member in charge of your care.

What is Carpal Tunnel Syndrome?

The carpal tunnel is a narrow passage in your wrist made up of small bones which lie below a tough band of tissue.

One of the nerves (the median nerve) that control the feeling and movement in the hand runs through the carpal tunnel.

Carpal tunnel syndrome (CTS) occurs when the nerve is irritated within the carpal tunnel. This can occur in pregnancy and postnatally due to increased fluid retention and changes in hormonal levels.



What are the signs and symptoms?

CTS is a common condition that can cause pain, numbness and a tingling sensation in the hand, first (index), middle and ring finger. Sometimes the thumb can also feel weak. It can occur in one or both hands.

Symptoms usually develop gradually, starting at night.

Do I need any tests to confirm the diagnosis?

Tests are not usually needed as symptoms in pregnancy and postnatally normally resolve in the first few weeks after baby is born.

What treatments are available?

In most cases the symptoms of CTS in pregnancy and postnatally will resolve without treatment.

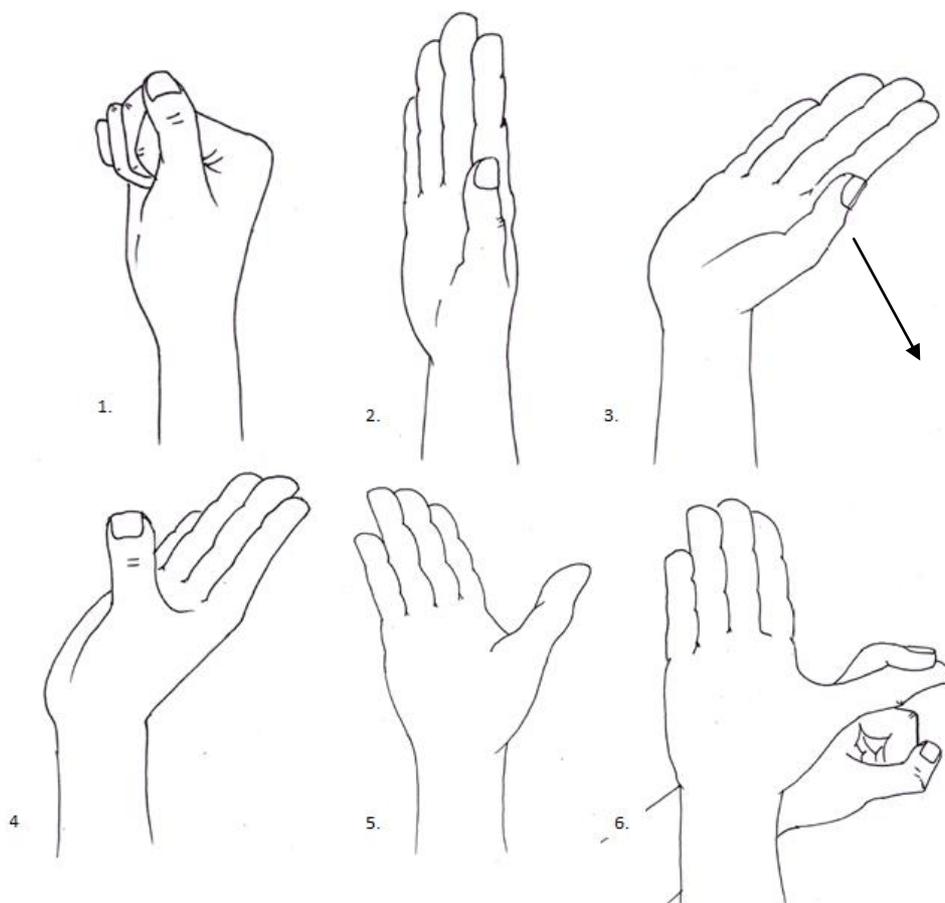
Non-surgical treatments such as wrist splints, exercises and activity modification can be used to treat mild or moderate symptoms.

Splinting

Your therapist may provide you with a splint to wear at night. The purpose of this splint is to prevent you from bending or straightening your wrist as this makes the carpal tunnel smaller and this can exacerbate your symptoms. The splint should not be applied too tightly.

Exercises

It is important you do these exercises as prescribed by your therapist. They can help your symptoms by moving first the nerve within the tunnel and then the tendons. This can help reduce fluid within the carpal tunnel and improve fluid return within the nerve.

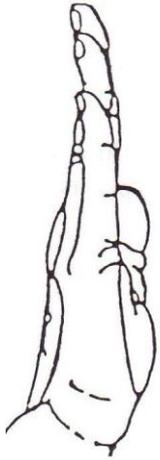


1. Start with your hand in a fist, wrist neutral / straight.
2. Then straighten your fingers keeping your thumb at the side of your hand.
3. Move your wrist backwards.
4. Now extend your thumb away from your hand.
5. Turn your hand so the front of the wrist faces you.
6. If this hasn't caused any tingling then stretch your thumb downwards.

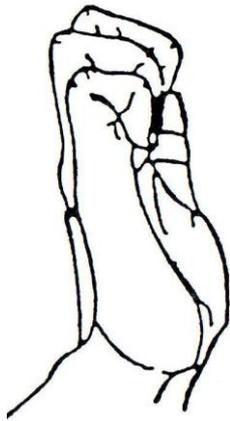
Go through the above sequence _____ times
_____ times during the day.

* Discontinue the exercises if they provoke your symptoms and/or your symptoms do not settle.

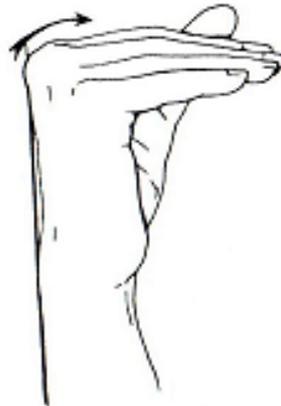
Further Exercises



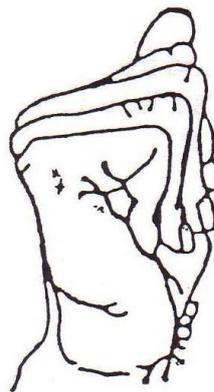
Straight



Hook



Table



Flat Fist



Full Fist

Go through the above sequence _____ times
_____ times during the day.

* Discontinue the exercises if they provoke your symptoms and/or your symptoms do not settle.

Changing how you do some activities

- Reduce how long, how often and how much force is needed to complete tasks, e.g. take regular breaks during heavier/repetitive tasks that increase your symptoms, ask the butcher to cut up your meat etc. Alternate heavier tasks with lighter tasks.
- Avoid positioning your wrists too far forwards and backwards, e.g. when pushing a buggy.
- Avoid prolonged or repetitive pinching or gripping, e.g. loosen your grip and change position if pushing a buggy/trolley, sweeping, mopping, reading book, holding your phone.
- Try different positions if breastfeeding aggravates your symptoms.
- Change your environment, e.g. check your computer station set up, use gloves or softer handles to reduce vibration during activities such as cycling or using a lawn mower.
- Avoid having arms hanging down by your sides for long periods of time.

Elevation

Elevate wrists and hands on pillows when you can to help reduce swelling.

Ice

Place an ice pack with a damp cloth wrapped around it against the area of pain or immerse the affected hand and wrist in cold water for 10 minutes.

Other Instructions or Advice

Therapist _____

Acknowledgements

Our sincere thanks to the Hand Therapy Team at St George's Hospital for their assistance with this advice.

Useful sources of information

Arthritis Research UK

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

British Society for Surgery of the Hand
NHS choices

www.bssh.ac.uk

<http://www.nhs.uk/pages/home.aspx>

Contact us

If you have any questions or concerns about regarding your splint or exercises, please talk to your therapist at your next appointment. If your concerns are more urgent, you can contact the pelvic health physiotherapy team on 020 8725 1333.

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit www.stgeorges.nhs.uk

Additional services

Patient Advice and Liaison Service (PALS)

PALS can offer you on-the-spot advice and information when you have comments or concerns about our services or the care you have received. You can visit the PALS office between 9am and 5pm, Monday to Friday in the main corridor between Grosvenor and Lanesborough Wing (near the lift foyer). **Tel:** 020 8725 2453 **Email:** pals@stgeorges.nhs.uk

NHS Choices

NHS Choices provides online information and guidance on all aspects of health and healthcare, to help you make decisions about your health. **Web:** www.nhs.uk

NHS 111

You can call 111 when you need medical help fast but it's not a 999 emergency. NHS 111 is available 24 hours a day, 365 days a year. Calls are free from landlines and mobile phones.

Tel: 111

AccessAble

You can download accessibility guides for all of our services by searching 'St George's Hospital' on the AccessAble website (www.accessable.co.uk). The guides are designed to ensure everyone – including those with accessibility needs – can access our hospital and community sites with confidence.

