Celebrate Wellness!

Carpal Tunnel Syndrome

Perhaps you’ve heard of Carpal Tunnel Syndrome, or have been diagnosed with it. What is it? Is your diagnosis correct? Is surgery required? Here are some facts and tips, courtesy of the Virginia Chiropractic Association.

At the wrist, a nerve called the median nerve passes through the palmar region to the hand via an anatomical “tunnel.” The “roof” of this tunnel is a ligament. True “carpal tunnel syndrome” occurs when the nerve is entrapped and inflamed as it passes through this tunnel. Though specialized nerve tests can confirm the diagnosis, they are not infallible; and clinical tests (hands-on procedures, and a history taken by a trained professional) are valuable tools towards revealing the problem’s source or sources.

The median nerve allows sensation in the palmar thumb, as well as the index finger, the middle finger, and the lateral (thumb-side) aspect of the ring finger. Problems on the pinkie-side of the hand are likely NOT carpal tunnel syndrome—simply put, “if the wire doesn’t go there, it can’t be the source of the problem.” In addition to the carpal tunnel, the “wire” that serves the hand passes through a number of areas where it can become inflamed or entrapped: the forearm (at a muscle called pronator teres), or in the neck (cervical spine including the discs, and related muscles). In addition, bundles of nerves and blood vessels can be impinged or entrapped at other areas, such as around the collar bone (clavicle) and chest muscles (pectoralis minor)—conditions typically diagnosed as “thoracic outlet syndrome” rather than carpal tunnel syndrome. Proper diagnosis of nerve entrapment and/or inflammation sites is crucial to treatment. Some patients respond well to surgery that cuts the transverse carpal ligament to make more space for the median nerve—a procedure known as a carpal tunnel “release”; yet many lose strength after the procedure, and it’s not uncommon for symptoms (pain and/or tingling) to return.

Non-surgical management of carpal tunnel syndrome and related conditions starts with a thorough evaluation. Did you know that approximately 25% of women will experience carpal tunnel syndrome or similar complaints during pregnancy? Surgery for a large percentage of these women is neither feasible nor reasonable; and many of them will choose to avoid medications and steroid injections. As with many patients—whether or not pregnant—with hand and/or forearm complaints, conservative management is the first line of defense. Night splints help some patients, yet others will find relief from manual interventions as performed by doctors of chiropractic. Manipulation of the wrist bones and related soft tissues, manipulation of the soft tissues of the forearm and neck region (including the scalenes), and spinal manipulation (particularly to the cervical spine) are all safe, gentle, and effective management tools—and when properly delivered to appropriate patients, they can even completely alleviate the problem at its source. If you know someone with carpal tunnel syndrome or forearm complaints, you owe it to them to suggest a chiropractic perspective on the problem.

Modern doctors of chiropractic are skilled in diagnosis, treatment, and prevention of a wide variety of common human conditions, including those affecting the forearm and hand. In addition, they have a particular training towards prevention. If your work or home life predisposes you to injury, your chiropractic doctor will advise you on simple and effective ways to minimize the short and long-term consequences. For example, repetitive use is a risk factor for carpal tunnel syndrome and related symptoms. If a simple adjustment of your keyboard, desk, chair, computer monitor, or workstation can help you, your chiropractor will be honored to provide that information.

If you are interested in living to your full potential, start by asking your chiropractor for guidance; or visit www.virginiachiropractic.org to find a highly-qualified chiropractor near you.

References:
1 http://www.mayoclinic.com/health/carpal-tunnel-syndrome/ds00326/dsection=treatments-and-drugs