

Carpal Tunnel Syndrome

At the base of the palm bounded by bones and ligaments, the carpal tunnel is a narrow passageway about as big around as your thumb. The median nerve passes through this tunnel along with 9 tendons. Carpal Tunnel Syndrome (CTS) occurs when the median nerve becomes compressed or squeezed at the wrist causing pain, weakness or numbness and tingling in the hand and wrist which can radiate up the arm. Symptoms usually develop gradually and may become worse at night. Symptoms often follow a pattern of improving with rest then worsening with activity that require grasping items or bending the wrist. What causes Carpal Tunnel Syndrome? Pressure on the Median nerve can be caused by trauma or injury to the wrist, frequent use of vibrating hand tools or any repetitive, forceful motion with the wrist in a bent position especially when done for prolonged periods without rest. CTS can also be caused by underlying medical conditions including rheumatoid arthritis, osteoarthritis, diabetes, pregnancy and thyroid problems. Symptoms of CTS usually resolve or improve when these underlying medical conditions are treated. Non-surgical Treatment for Carpal Tunnel Syndrome Treatment for CTS focuses on decreasing demands on the wrist and hand and reducing pressure on the median nerve. This is usually accomplished by activity modification, splinting, exercise and anti-inflammatory measures which may include ultrasound, iontophoresis, cold packs and oral medication. Non-surgical treatment is most effective with mild to moderate symptoms of CTS. Activity Modification Wrist position is key to controlling carpal tunnel symptoms. The carpal tunnel is most narrow when the wrist is bent down or extended all the way back and largest when the wrist is straight. The more the wrist is bent, the more pressure is placed on the median nerve. Changing how you do repetitive hand activities or avoiding these activities all together can help. Principles of activity modification to follow:

- Avoid flexed finger/flexed wrist postures.
 - Take frequent breaks (every 30-60 minutes) from repetitive hand activity.
- Avoid repetitive, forceful grasp and prehension activities.
- Relax your grip. Avoid grasping too hard when driving, writing or using hand tools.
- Alternate activity frequently.
- Wear padded gloves when working with vibrating equipment.

- Use correct posture. Wrist Splints (braces) Splints are used to immobilize the wrist in a neutral (unbent) position to maximize the size of the carpal tunnel and reduce pressure on the median nerve. Splints are worn during the night. Usually it isn't necessary to wear splints during the day. Doing so may actually worsen the problem because it makes work more awkward. Physical Therapy and Exercise Anti-inflammatory modalities of iontophoresis, ultrasound and cold packs and special hand exercises can help to relieve mild to moderate symptoms of CTS. Arm & Shoulder Stretch Lace fingers together & turn palms facing out as you press your hands away from your body until a stretch is felt. Hold 10 seconds, Repeat 3-5 times. Cervical Forward Bending Bend head forward until a stretch is felt. Hold 10 seconds, Repeat 3-5 times. Wrist Flexor Stretch Keeping elbow straight, grasp involved hand and slowly bring wrist back until a stretch is felt. Hold 10 seconds, Repeat 3-5 times. Executive Stretch Lace fingers together behind your head, bringing your elbows back as far as possible. Squeeze your shoulder blades together. Hold 10 seconds, Repeat 3-5 times. Cervical Side Bending Tilt head toward shoulder until stretch is felt. Hold 10 seconds, Repeat to opposite shoulder, Repeat 3-5 times. Wrist Extensor Stretch Keeping elbow straight, grasp involved hand and slowly bend wrist down until a stretch is felt. Hold 10 seconds, Repeat 3-5 times. Posterior Shoulder Stretch Grasp your elbow with other hand as shown. Pull the elbow and arm across your chest so that you feel a stretch. Hold 10 seconds. Repeat 3-5 times. Cervical Rotation Turn head to look over shoulder until a stretch is felt. Hold 10 seconds. Repeat to opposite shoulder. Repeat 3-5 times. Strengthening exercises for affected muscles and reconditioning of the arms are begun as symptoms resolve. See your physician or an Excel physical therapist if you are experiencing symptoms of CTS. www.ExcelPT.com

About the Author

Information on heart disease and related cardiovascular conditions includes medications, procedures and tests, symptoms, and treatment.

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