

Introduction

Carpal Tunnel is the space underneath the volar side of the wrist. There are muscles, tendons and the median nerve running through. In some situations, e.g. repetitive movement of the wrist, wrist trauma, rheumatoid arthritis, thyroid disease, diabetes, menopause, pregnancy etc., where the median nerve is being compressed, leading to Carpal Tunnel Syndrome and resulting in numbness, tingling sensation and painful hand, affecting daily activities.

The Operation / Procedure

Surgery will relieve the pressure in carpal tunnel and free the median nerve from pressure. This can be done through open surgery or endoscopic surgery. The operation is usually done under local anesthesia. If stable, patient can be discharged on the same day.

Preoperative Preparation

1. Admit 1 day before or on same day of this “elective” operation.
2. Anesthetic assessment before operation. Inform your doctors about drug allergy, regular medications or other medical conditions.
3. Empty bladder and change to operation clothes before transfer to operating room.

Postoperative Instruction

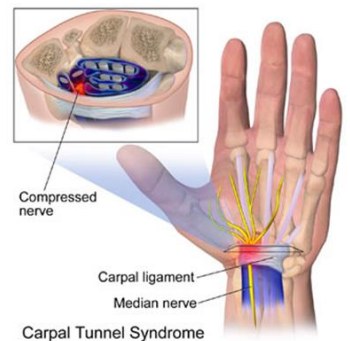
A. General

1. Mild discomfort or pain over the operation site. Inform nurse or doctor if pain severe.
2. Inform nurses if more analgesics are required

B. Wound care

1. Rest the wrist and prevent flexing the painful wrist can help to control inflammation and edema.
2. Mobilize fingers and other joint of the upper limb can help to decrease edema and enhance function.
3. If there is wound on the wrist, keep it clean and dry. Avoid wetting the wound. If there are stitches that need to be removed, usually, it will be removed 14days after the operation. Have them removed at the health clinic as instructed.
4. If there is wound pain, take pain killers as prescribed.
5. If you have the operation performed, and there is severe bleeding or purulent discharge from the wound, or persistent redness, swelling or pain over the wound, seek medical advice promptly.

- ### C. Diet
- Resume diet, usually 4 hours after anesthesia, and when taking sips of water well.



Common Risks and Complications (not all possible complications are listed)

A. Anesthesia related complications

1. Cardiovascular: myocardial infarction or ischemia, stroke, deep vein thrombosis, pulmonary embolism, etc.
2. Respiratory: atelectasis, pneumonia, asthmatic attack, exacerbation of chronic obstructive airway disease.
3. Allergic reaction and shock.
4. Toxicity of local anesthetic may result in serious complication although rare.

B. Procedure related complications

1. Wound infection, nerve damage.
2. After recovery, carpal tunnel syndrome still can recur. As patient's condition is different, the treatment and rehabilitation regimes may be different. If necessary, please seek professional advice.

Alternative Treatment

1. Appropriate rest and activity modification.
2. Occupational Therapy e.g. hand splint.
3. Oral medication, .e.g. anti-inflammatory drugs, diuretics, etc.
4. Physiotherapy, e.g. ultrasound treatment.

Things to take note after discharge

1. Contact your doctor or a nearby Accident & Emergency Department if you find increasing discharge, pain and or redness around the wound
2. Take analgesics prescribed by your doctor if required
3. Remember to attend follow up as scheduled. Get well soon.

Remarks

This is general information only and the list of complications is not exhaustive. Other unforeseen complications may occasionally occur. In special patient groups, the actual risk may be different. For further information please contact your doctor. Evangel Hospital reserves the right to amend this leaflet without prior notice. We welcome suggestions or enquiries on the information provided in this leaflet. Please contact our Healthcare professionals so that we could follow up and make improvement.

Reference

Union Hospital: “Information of Carpal Tunnel Release” (2021)
https://www.union.org/new/consent_form_files/OP-10e.pdf (20-07-2023)