



 Health | December 2, 2017 | By Zahra Barnes

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# 9 Things You Need to Know About Carpal Tunnel Syndrome

No, you don't have to stop typing forever.



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es on steroids. This **health condition** can cause fingers, wrists, and even your arms. Luckily, carpal tunnel treatment is precise enough to completely resolve the problem that fuels this syndrome in the first place. So here's everything you need to know about carpal tunnel syndrome, including how to treat it if you're experiencing symptoms.

## 1. Carpal tunnel syndrome all comes down to a single nerve.

The median nerve, which runs from your forearm into your thumb, index, and middle fingers, along with part of your ring finger, is nestled inside a canal known as the carpal tunnel. “When the median nerve doesn’t get enough blood flow, it makes your hand hurt and feel like it’s tingling and numb,” Leon S. Benson, M.D., an orthopedic surgeon with the **Illinois Bone and Joint Institute** who specializes in elbow, hand, and shoulder issues, tells SELF.

These symptoms are especially likely to strike when you’re using your hands for things like driving and talking on the phone, and they can make you instinctively shake your hand to get rid of the sensations. And, since apparently nothing is sacred, your symptoms might be particularly bothersome at night and wake you up.

## 2. Your constant typing actually isn't the main carpal-tunnel culprit.

Thought experts haven't yet pinpointed one single cause behind carpal tunnel, there are various risk factors. One is being born with a tight carpal tunnel, potentially due to genetics, Dr. Benson says. Because they cause swelling that puts pressure on the carpal tunnel—whether through weight gain, fluid retention, inflammation, or another mechanism—health conditions like **pregnancy**, **menopause**, **diabetes**, **obesity**, and **rheumatoid arthritis** can contribute as well.

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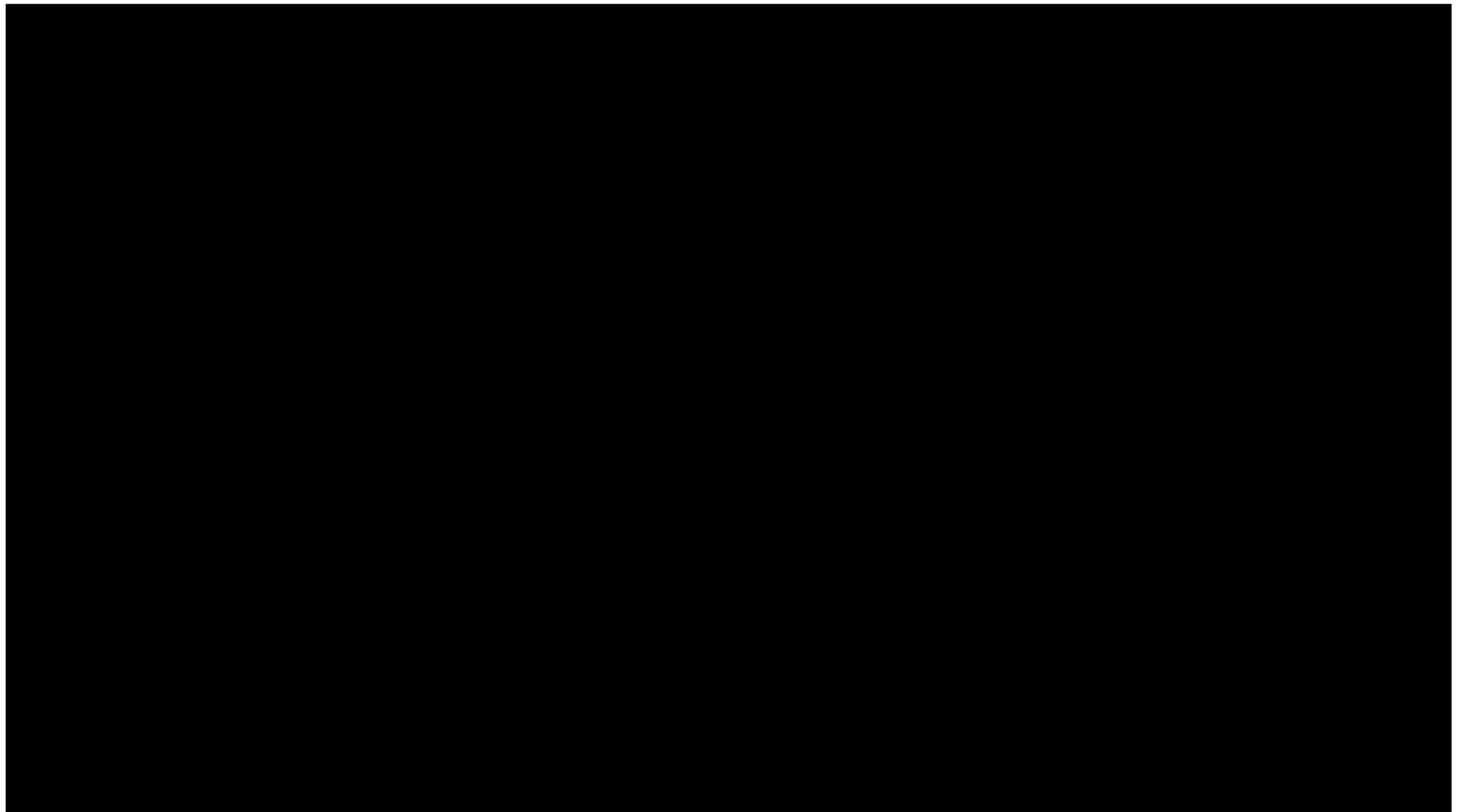
Doing repetitive work like typing doesn't seem to explicitly cause this condition, but it may bring it about if you're predisposed, [David Hay](#), M.D., an orthopedic surgeon at Kerlan-Jobe Orthopaedic Clinic in Los Angeles, tells SELF.

### **3. If carpal tunnel is allowed to progress unchecked, it can lead to permanent nerve damage. But when caught soon enough, it can be cured.**

Carpal tunnel symptoms may come and go, or bother you more at certain times than others, but this condition will usually worsen over time without treatment. The exception is if one specific thing caused your carpal tunnel syndrome, then you completely remove it from the equation—like if you got carpal tunnel due to weight gain during [pregnancy](#), then you give birth, Dr. Benson says.

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If you think you have carpal tunnel syndrome, see a doctor, who can diagnose you based on your symptoms, a physical examination, an X-ray, or tests like an electromyogram to see how your hands are functioning, according to the [Mayo Clinic](#). Once you're diagnosed, they'll help you come up with an action plan based on the severity of your symptoms.

## **4. The first line of defense is typically pain medication like NSAIDs.**

There are essentially two options for carpal tunnel treatment, Dr. Benson says: You can reduce swelling around the median nerve, or you can make the canal surrounding it bigger. **Non-steroidal anti-inflammatory medications** can ease the swelling that aggravates your median nerve, Dr. Benson says. This can help in the moment, but it's not a long-term solution.

## **5. You can also try a cold compress for sweet, sweet relief.**

The cold temperature can help decrease inflammation around the median nerve and ease carpal tunnel-related **pain**. Dr. Hay typically advises people to ice the area for 10-15 minutes, remove the ice for 30-40, then ice again for 10-15. "Don't over-ice it," he says. Doing so can harm your skin and reduce blood flow.

## **6. The next level of treatment involves using a nighttime wrist splint.**

A splint helps make sure you're not keeping your wrists bent for hours while you **sleep**. "You don't need to immobilize your wrists during the day when you're aware of them, but a lot of times when people are asleep, they curl up like a fetus and naturally bend their wrists," Dr. Benson says. This can lead to a carpal tunnel flare and very rudely rouse you from your sleep.

If you have carpal tunnel, talk to your doctor about whether a wrist splint makes sense for you. If a splint still hasn't assuaged your symptoms after six to eight weeks, it's time to get more aggressive.

## **7. Your doctor may recommend corticosteroid treatment, which can do a brilliant job of relieving inflammation.**

"With a thin needle, we inject a small amount of an anti-inflammatory corticosteroid around the carpal tunnel," Dr. Benson says. "It delivers medication right around the nerve and is incredibly

effective.”

Corticosteroid injections can often completely eradicate less advanced cases of carpal tunnel syndrome, Dr. Hay says. They can even be helpful if your case is more advanced, because the relief may still last for months. This can be useful if [surgery](#) isn't convenient for you right now or you can't afford it, but your symptoms aren't responding to treatment methods like a splint, Dr. Hay says.

## **8. Surgery is the final option for carpal tunnel treatment, and it can be quite successful.**

The point is to make the canal around the median nerve roomier by cutting the ligament pressing down on the nerve. “It’s like loosening a belt one notch,” Dr. Benson says.

The surgery can either be endoscopic, when your surgeon makes smaller incisions and uses an tool called an endoscope to perform the surgery, or open, which involves a larger incision of around two inches, according to the [National Institute of Neurological Disorders and Stroke](#). It’s typically done under a light level of anesthesia or sedation and takes around 20 minutes, Dr. Benson says.

Your symptoms can completely disappear after surgery, but you might experience some mild soreness for a few months, Dr. Hay says. You may also experience a [weak grip](#), though that usually improves over time, according to National Institute of Neurological Disorders and Stroke. Most people are back to driving after a day or two, Dr. Hay says, though you may have to modify your work and lifestyle routines for a few weeks depending on your healing. And for some people, surgery really is able to resolve their carpal tunnel.

## **9. There are a few strategies for preventing carpal tunnel—none of which involve throwing out your keyboard.**

If you do any sort of repetitive work involving your hands for hours on end (like typing or assembly work), taking frequent breaks can help ward off wrist and hand [pain](#). “Take a 5- or 10-minute break every hour or two,” Dr. Benson says. “Like anything else in your body, give your hands and wrists a rest if you’re using them constantly.”

During this time you can also do a few stretches to prevent straining your fingers, hands, and wrists. Here are a few you can cycle through on each hand during your breaks, courtesy of Dr. Benson,

although it's always a good idea to check in with your own doctor before introducing new exercises into your routine. (Especially if you already have carpal tunnel—definitely check in with your doctor before trying these in that case.)

- Hold your hand up like you're stopping traffic. Flex and extend your wrist.
- Make a fist, then extend your fingers all the way out.
- Use one hand to gently press the extended fingers of the other hand back.

Having an ergonomic work set-up can also help ward off all sorts of aches and pains, not just ones in your wrists and hands. Check out the Mayo Clinic's guides for an ergonomic workspace, whether you're [sitting](#) or [standing](#).

Keep in mind that if you already have carpal tunnel syndrome, prevention isn't enough to keep your symptoms from getting worse. So if you're suffering, discuss carpal tunnel treatment with your doctor. That's the best way to stop looking like a 2003 throwback who's constantly shaking it like a polaroid picture.

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