

Carpal Tunnel

“Mary” has been suffering with chronic carpal tunnel for months. She has had various treatments including anti-inflammatories, braces, ice, ultrasound and had even taken some time off work. Her doctors next suggestion is surgery. But Mary thought she would try one more thing.

A friend had suggested Physiotherapy. On assessment, Mary presented with some pain and paraesthesia into her fingers, some tenderness over the front of her wrist; she felt some of these symptoms in her elbow as well. The physiotherapist found weakness through her wrist, fingers and somewhat in the muscles of the elbow.

Conducting a thorough assessment, the physiotherapist assessed Mary’s neck (cervical spine). There were restrictions in the vertebral movements of the neck especially at the level of the 6th and 7th vertebrae. The nerve supply for the wrist exits at this level.

Physiotherapy consisted of treatment and exercise to mobilize the restricted segment and then strengthen the spine. Mary’s symptoms subsided. Treatment completed with further upper extremity strengthening and spinal stabilization exercises, neck and back care education and ergonomics.