

**Carpel tunnel syndrome (CTS)** – a disorder of the wrist caused by compression of the median nerve supplying the hand.

**Synonyms:** mononeuropathy

**Symptoms:** Numbness, tingling and/or pain in the: thumb, index, middle, and part of the ring finger. Some patients present with complaints covering the entirety of the hand. Pain at night is a common finding. Repetitive motions that flex the wrist, including the frequent pinching or grasping of objects may increase symptoms. In advanced cases, strength in the muscles innervated by the median nerve may be affected, resulting in decreased grip strength.

**How is it diagnosed?**

A thorough patient history and physical examination can lead towards the diagnosis of carpal tunnel syndrome. Nerve conduction studies, diagnostic ultrasound, and MRI may be utilized if a patient with suspected CTS is unresponsive to conservative treatments.

**How is it treated?**

Nocturnal (nighttime) splints and tendon gliding exercises are the initial form of therapy. Modalities such as therapeutic ultrasound, cold laser, cross friction massage, and joint manipulation/mobilization may be implemented to speed recovery.

**Alternative treatments:**

NSAID's, corticosteroid injections, surgery.

**Prognosis** is good for mild CTS. Most patients will be recovered in 2 months. Moderate to severe cases of CTS, that don't respond to conservative measures, would be referred out appropriately.

**Duration of care:** *Approximately* 2 times per week for 6 weeks for a total of 12 visits in the first month and half.