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CARPAL TUNNEL SURGERY

What to do before surgery?

Use a chlorhexidine gluconate (CHG 4%) scrub brush to thoroughly wash the hand the night before, the morning of surgery, and at the time of surgery. Wash for 7 minutes. Wash using the sponge and water. These sponges can be purchased at a drug stores. You may eat and drink and continue your medications (including any blood thinners). Please take your first dose of antibiotics the morning of surgery prior to leaving your home.

What will happen at the day of surgery?

Before going in for surgery, you will meet go to doctor Dr. Anzarut's office. Your consent and follow-up will be reviewed. A fully qualified doctor will freeze your hand. The freezing should be placed at least one hour prior to surgery and will last for 12 to 48 hours. You will meet Dr. Anzarut at the hospital. A nurse will help you into a stretcher and prepare the area for surgery. There may be a delay of 5 - 60 minutes so please bring something to do. On average, procedure lasts for 5-10 minutes.

CARE AFTER CARPAL TUNNEL SURGERY

This is a short surgery with a small incision; however, the recovery is not short and not small. Most patients can do all activities at 6 weeks and have full recovery by 6 months. Carefully follow the instructions below to ensure the best result.

The most important thing in considering carpal tunnel surgery is to understand the side effects of the surgery itself. After the surgery, there's some discomfort and patients generally require a Tylenol 3 or similar painkiller the night of surgery and the next morning. After that, they are usually able to take a plain Tylenol or an anti-inflammatory once or twice or three times a day for the next two to five days.

For the first 48 hours after surgery, it is very important to reduce swelling and inflammation. This helps long-term recovery. It is important to ice the hand while awake, 15 minutes on and 15 minutes off. It is important to keep the hand elevated above the level of the heart relative to the ground.

This means:

- Keeping the hand at chest level or slightly higher while walking.
- Keeping the hand at chest level or slightly higher while sitting.
- Keeping the hand anywhere adjacent to the body while lying down or sleeping.

For the first two weeks after surgery, it is very important not to use the hand. For this reason, many people try to plan the surgery around a time when there may be someone around to help.

- Week 1 to week 2: You will open and close your hand to keep it moving and avoid stiffness, but you will not be using your hand. You will be in a splint. Leave the splint on and keep it dry. If you shower use a plastic bag around the splint to keep it clean. If the splint becomes too tight from swelling remove it and re-apply this more loosely.
- Week 2 to week 4: You can start to use the hand for basic activities. This includes anything that involves grip or lifting up to two pounds. At four weeks, you can start using your hand more and more. At this point remove the splint. Wash soak with hydrogen peroxide for 2 minutes using a clean paper towel. Pat the area dry and cover the incision with a clean bandage.
- Week 6: You should be able to do everything and anything that you would like to do with your hand.

However – and this is extremely important – for the first six months, on average, there are ongoing symptoms. The place where the incision is on the palm is often sensitive to touch. With heavy lifting or gripping, the muscle at the base of the thumb and the muscle at the base of the small finger will be crampy. This does not mean you'll be restricted in your activities; however, you will notice that things don't feel quite right. And this lasts on average, for six months.

Avoiding Infection After Carpal Tunnel Surgery

The other thing that is very important is to avoid infection. For the first two weeks after surgery, you will have a small dressing on your hand and a splint to prevent wrist motion. This should stay on. After two weeks, you will take the dressing off and you will be able to get the hand wet in the shower. At this point remove the splint. Wash soak with hydrogen peroxide for 2 minutes using a clean paper towel. Pat the area dry and cover the incision with a clean bandage. This should continue for 2 more weeks. This is very important to avoid infection.

It is also very important to avoid sitting water. Therefore, during the first four weeks, patient should avoid baths, hot tubs, swimming pools, dishes, and gardening. Even if you use gloves to protect your hand, you may get an infection. If you need to do something where you're worried your hand may be exposed to potential infectious material, it's important to make sure that you have your waterproof dressing on and also use a disposable one-time use glove to keep your hand clean. For example, one of these latex gloves.

I hope this video has been informative and helpful in understanding a little bit about carpal tunnel syndrome and carpal tunnel surgery.

Use of the hand

Move the fingers once the freezing comes out. You should be able to make a full fist by the 3rd week. During the first 3 weeks, avoid putting direct pressure against the incision, avoid heavy lifting, and avoid wrist motion. Excess activity early on will worsen the pain, slow the healing, cause infection and delay recovery. After 4 weeks, you can use your hand as tolerated. Avoid activities that produce discomfort. If after 3 weeks, you are unable to make a full fist, you may need formal physical therapy. If this occurs, please call Dr Anzarut. By 6 months, you should have full use of the hand without and discomfort.

Follow-up

Your sutures *may* need to be removed or trimmed after 2-3 weeks. Suture removal can be done at Dr. Anzarut's office. If you have any questions or concerns prior to this,

please call the office. *Avoid having another physician treat problems related to your surgery.* If you have concerns, call the office (250.597.2064). If you are unable to get through to the office and there is an emergency, you can text or call Dr. Anzarut directly (250.510.4668).

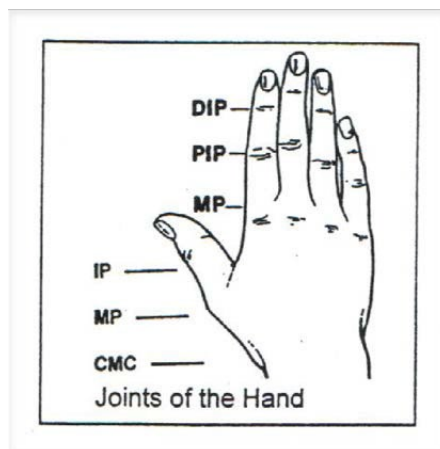
When should I call the office urgently?

- 1) Increasing pain
- 2) Infection
- 3) Unable to make a full fist by 3 weeks post operatively
- 4) *Any other concern*

Hand Therapy and Rehabilitation After Carpal Tunnel Release

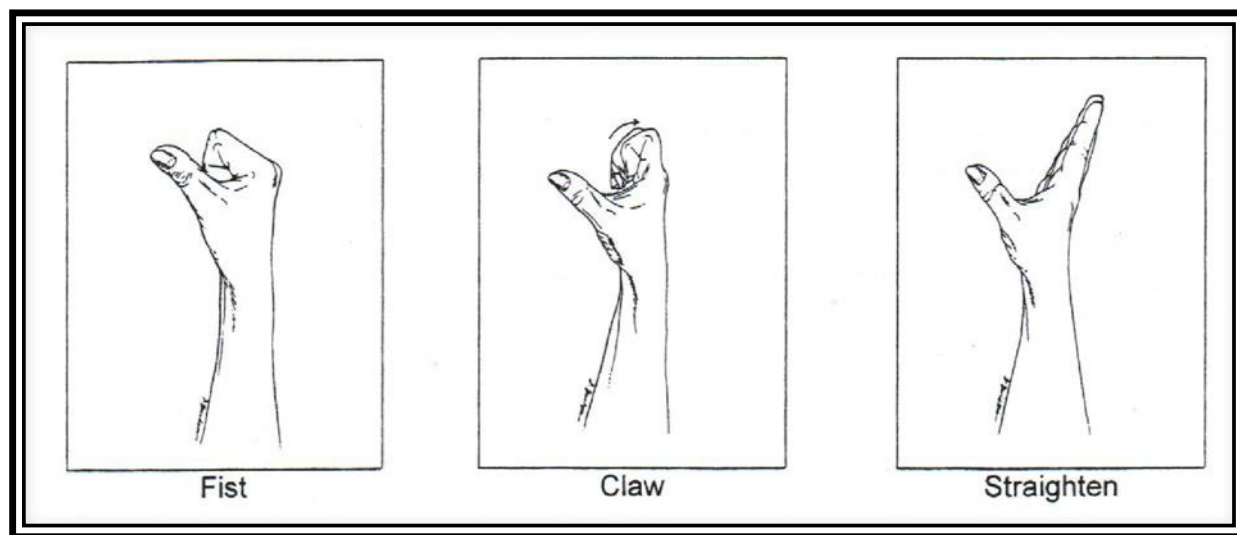
Therapy is an essential part of your recovery after carpal tunnel surgery. The following material was developed by Dr. Anzarut to help you obtain the best possible outcome.

The following diagram is a reference to help identify the names of the different joints in the hand:



Activities for the first two weeks after carpal tunnel surgery

Avoid any heavy lifting. If this is not possible, defer your surgery date or speak to Dr. Anzarut about having a cast placed. Start composite finger positions. The following three diagrams show composite positions of the fingers. Start by making a full fist, then straighten your MP joints while keeping the PIP and DIP joints flexed. Follow this with straightening your fingers. These exercises are performed 4 times a day for 10 minute sessions.

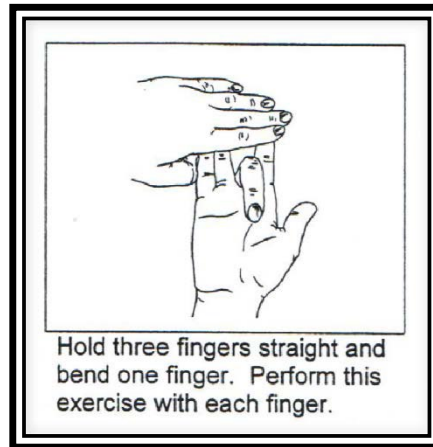
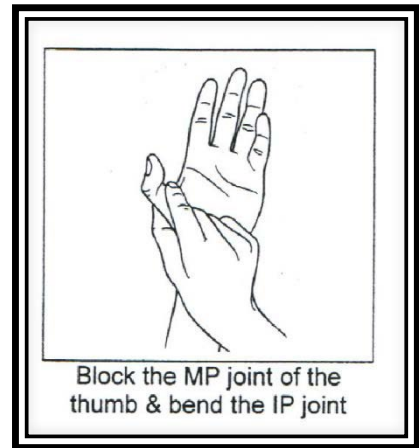
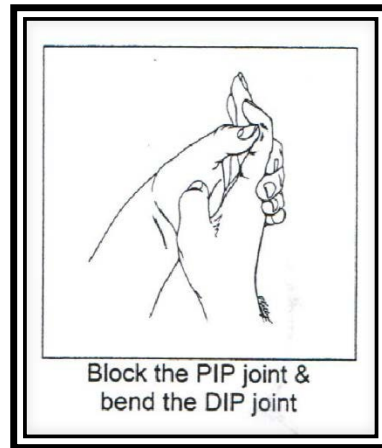
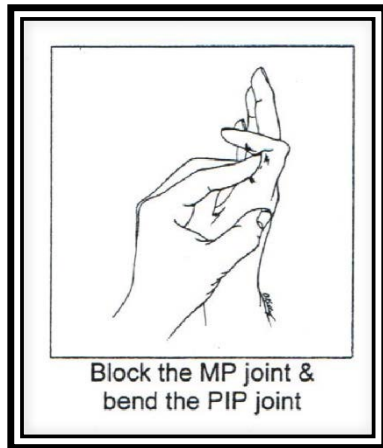


Activities to start 3 weeks after carpal tunnel surgery

After suture removal, continue finger composite positions. At this time, you will be ready to add finger blocking positions, scar desensitization and scar massage. These exercises are performed 4 times a day for 10 minute sessions.

Finger blocking exercises

The following four diagrams show blocking positions of the fingers.



Desensitization exercises and scar massage

The scar will be hypersensitive for 6 weeks to 6 months after the surgery. Touching the scar with light pressure and soft fabrics will decrease the scar sensitivity. Progress to deeper pressure and coarser textures as tolerated.

Every patient is unique. These guidelines provide a general frame of reference. Dr. Anzarut is available to discuss your hand therapy program and ensure it is right for you.