

# 4 Common Hand Problems & How To Treat Them



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# 4 COMMON HAND PROBLEMS & HOW TO TREAT THEM

Hands are such useful parts of the body, but we rarely pay attention to them until something goes wrong. Below are some common hand ailments, their symptoms and treatments.





1

# CARPAL TUNNEL SYNDROME

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**Carpal Tunnel Syndrome is one of the most common disorders of the hand. It can occur at any age, but most often in adults. While carpal tunnel syndrome affects thousands of people every year, there are a lot of misconceptions about it, especially about treatments and their effectiveness.**

## **Symptoms**

Carpal tunnel syndrome occurs when a nerve is pinched in the palm or wrist area. The typical symptoms are numbness and tingling in one or both hands - often worse at night or when driving. People often report that they wake up at night and have to shake their hand to get relief. They will also complain that they don't feel things well or they drop things frequently. In advanced cases, the hand muscle becomes weak. Other nerve problems can mimic carpal tunnel syndrome, so evaluation by a specialist is necessary to confirm the diagnosis.



# CARPAL TUNNEL SYNDROME

## CONTINUED

### Diagnosis

The diagnosis of carpal tunnel syndrome is often clear after a hand specialist listens to a person's history and gives a physical examination. If a diagnosis is not obvious, the doctor may perform a nerve conduction test. This exam is to see if the nerve is pinched and if there is any muscle damage.

### Treatment

There are several different treatment options for Carpal Tunnel Syndrome. Splinting is often recommended in the early stages of the disease. Wearing a splint at night can sometimes help people sleep better. However, splinting does not usually cure the disease.

A second treatment option is steroid injections. The injection of a steroid into the area around the nerve helps to shrink the structures around the nerve, reducing pressure on the nerve. The steroid injection is done in a doctor's office and has a low risk of side effects. People can manage their Carpal Tunnel symptoms with splinting and steroid injections, but often their symptoms worsen.

# CARPAL TUNNEL SYNDROME

## CONTINUED

### **Treatment** (continued)

Surgery is recommended in moderate to severe cases of Carpal Tunnel Syndrome. Surgery makes more room for the nerve, relieving the symptoms. There is a common misconception that carpal tunnel release surgery is ineffective and requires a long and unpredictable recovery. On the contrary, the surgery is short and, when done properly, has consistently good results. Typically, there is no need for a splint or cast, and people are encouraged to start moving their fingers shortly after surgery. People's symptoms are often quickly relieved and they are able to resume their regular daily activities soon after surgery.

### **Facts about Carpal Tunnel Syndrome:**

- It is a common disease where a nerve in the hand becomes pinched
- Typical symptoms are numbness or tingling in the hand, often waking people up at night
- Treatment options include splinting, steroid injection or surgery
- The surgery is a short procedure with minimal side effects
- When diagnosed properly, carpal tunnel syndrome can be treated effectively, with little down time.



2

**TENNIS ELBOW**

# TENNIS ELBOW

**Tennis elbow is a common disorder that results in pain along the outer part of the elbow area. Although it is called tennis elbow, this problem can occur in anyone who performs repetitive gripping or lifting activities. The problem occurs equally in men and women, mainly between the ages of 35 to 50 years of age.**





# TENNIS ELBOW

## CONTINUED

### **Symptoms**

People typically complain of pain along the outer part of the elbow, worse when they lift their elbows or extend their wrists. They usually have no problems moving their elbows, and have no stiffness. People will also point to tenderness over the bony prominence along the outer part of the elbow

### **Treatment**

The hallmark of tennis elbow treatment involves changing one's activities, including avoidance of things that involve prolonged gripping or torqueing, such as using a hammer or screwdriver. People are also advised to wear a tennis elbow brace to support the extensor muscles in the forearm.

Physical therapy is also helpful in treating tennis elbow symptoms. This involves massage, stretching and strengthening of the affected muscle groups.

# TENNIS ELBOW

## CONTINUED

### **Treatment** (continued)

Another treatment option is an injection of a steroid into the painful area, which can help relieve symptoms, at least temporarily. An injection can be repeated one or two times if symptoms recur.

Surgical treatment is an option if the treatments above don't work for people, or for those whose symptoms keep coming back. The surgery usually involves cutting and releasing the tendon, removing inflamed tissue and repairing (reattaching) tendon tears. Most people experience an improvement in their symptoms following surgery. Clerical work can be resumed in 2-4 weeks and manual labor from 8-12 weeks after surgery.

It's important to note that surgery for tennis elbow is seldom needed because the condition usually improves with tendon rest and nonsurgical treatment. Most people can manage their symptoms from tennis elbow and return to their normal activities.



**3**

**DUPUYTREN'S  
DISEASE**

# DUPUYTREN'S DISEASE

## Symptoms

Dupuytren's disease is usually painless. Early signs include knuckle pads, well-defined thickenings over finger joints, and nodules on the palms. As the disease progresses, it leads to permanent shortening of the joints, known as contractures, and the person cannot extend their affected fingers. As a result, people have trouble grasping objects and the flexed finger(s) can get in the way when using their hand.

Fingers most commonly affected are the ring and small fingers. When the joint contractures, or shortening and hardening of the tissue, occurs for a period of time it can lead to contractures of the skin, tendons, and ligaments around the affected joints.

## Treatment

Several treatments are available for Dupuytren's disease. Surgery may not be necessary if the nodules don't interfere with use of the hands. In this case, there are two non-surgical treatments.

# DUPUYTREN'S DISEASE

## CONTINUED

### **Treatment** (continued)

The first treatment, called needle aponeurotomy, is an office procedure where a needle is used to make multiple passes through the abnormal tissue in the palm to weaken it. Then the Dupuytren's cord can be ruptured. This procedure does not remove the diseased tissue but can be repeated if needed. This treatment is most useful for people with a small area of disease or those who can't undergo surgery.

The second non-surgical treatment is injecting an enzyme into the diseased tissue. The enzyme breaks up the collagen in the cord, allowing the finger(s) to extend after 24 hours. This procedure may cause numbness or an allergic reaction and some people need more than one injection to completely release the finger(s). Symptoms may reoccur when both of the non-surgical treatments above are used since the diseased tissue is not removed.

Surgery is recommended when the person has lost substantial use of their fingers due to the progression of the disease. In surgery, the doctor removes the scarred tissue to free the fingers and release the tendons.



4

# NAIL DEFORMITIES

# NAIL DEFORMITIES

## CONTINUED

**Most nail deformities are the result of traumatic finger or toe injuries. However, there are also cases where deformities result from prior biopsy or the removal of nail lesions.**

There are several common nail problems that people suffer from. The first involves grooves or raised areas in the nail. This is often a result of a crush injury. These deformities can bother people if dirt and dust become trapped under the grooved or raised areas. The abnormal part of the nail is usually a result of a scar within the nail bed, the soft part of the nail below the nail plate – what most people refer to as their nails. The treatment is based on the width of the groove or raised area. The simplest procedure is to remove the scar and repair the nail bed. This allows the nail to grow together with a uniform appearance.

# NAIL DEFORMITIES

## CONTINUED

A second common nail problem is a hook nail deformity when the nail hooks downward at the end of the fingertip. This deformity is the result of a fingertip injury, resulting in the nail bed becoming longer than the underlying bone. Without proper support for nail growth, the nail hooks around the tip of the finger. The treatment is to provide more support for the nail bed or to shorten the nail bed to the length of the bone.

Another nail deformity can occur when there is a scar from the surrounding skin on the nail. This unsightly deformity can be a source of great embarrassment for people. This can be the result of a crush injury or infection at the edge of the nail. These deformities can be corrected by removing the scar tissue and reconstructing the nail fold, allowing the nail plate to grow properly without adhering to the surrounding skin.



# NAIL DEFORMITIES

## CONTINUED

The fourth and most severe nail deformity is when the entire nail grows poorly, becoming an irregular, firm area without having any actual nail plate growth. This is often because of a severe crush injury. This type of severe deformity can only be corrected by removing the nail and transferring a thin piece of nail from one of the big toes. Many people are nervous about this procedure, fearing that the toenail will be affected long term, but the toenail will continue to grow normally. In cases of severe nail deformities, this is the best option for obtaining a normal appearance and growing a nail on a traumatized finger.



Nail deformities can cause both functional and aesthetic problems for many people. However, they can be corrected, improving their appearance and allowing people to use their fingers normally.



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