Pain In Your Hand May Not Be Arthritis

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Anyone with pain in their hand immediately assumes they have “arthritis”. This is especially true if you are older and perhaps also have arthritis in a hip, knee or other joints.

Hand pain doesn’t usually begin all at once. It can take many forms. Some of my patients tell me they first felt shooting pain in the hand or wrist. It may have awakened them or was first felt while driving.

Well calm down, it probably isn’t the arthritis you think it is!

A painful hand or hands can indicate another problem.

Carpal Tunnel Syndrome

Everyone has by now heard of carpal tunnel unless you live in a cave. But do you really know what carpal tunnel syndrome is? Let me demystify carpal tunnel syndrome.

Nine tendons and a very large nerve (median nerve) pass through the wrist in a compartment (tunnel) on the palm side of the wrist and hand. The tunnel has bone on three sides and a strong ligament on the fourth side.

The median nerve can be “pinched” as patients say or squeezed in the canal by a variety of conditions. Tendons can tolerate pressure a lot better than nerves.

Symptoms

The poor nerve begins to complain by causing pain, but also numbness and tingling or an asleep feeling in the hand and fingers. I have had patients tell me the pain even began to go up the arm even to the shoulder and neck. In that case it can be confused with a cervical disc condition.

The hand and wrist can feel swollen and some people are convinced they have “bad circulation”. If the symptoms come on mainly at night in bed, patients have to get up, shake their hand to wake it up and reposition the wrist. They walk around for awhile and pretty soon the symptoms decrease.

Similar symptoms often occur when driving.

Who gets Carpal Tunnel Syndrome?
Anything that reduces the space in the tunnel can cause it. Increased tightness in the ligament can cause it. Swelling in the canal in the lining around the tendons can cause it. Doctors call this lining synovium. Swelling or inflammation is termed “synovitis”. This can be caused by diabetes, thyroid trouble or other glandular (metabolic) disorders.

Research on large patient populations is beginning to show that work related activity with the hands and wrists is not the primary cause of carpal tunnel syndrome. It certainly may be in some cases, but not everyone. Suffice it to say that compensation insurance carriers often deny claims by employees of work related carpal tunnel syndrome. It’s kind of a mess really.

**Diagnosis**

I make the diagnosis on my medical history and orthopaedic examination. Tapping on the palm side of the wrist can produce tingling or shocks into the hand or fingers. If this is present it is a good bet you have carpal tunnel syndrome.

Another test is to press the back of your hands together in a reverse prayer position. This test is positive if you feel symptoms within a minute. Another tip off is shrinkage of the thumb muscle near the palm. If present, it can be quite dramatic.

**What to do?**

We’re out of time this week, but I want to explain about treatment of carpal tunnel syndrome next week. Please return for the next installment.

All Orthopaedic Surgery problems including carpal tunnel syndrome can be evaluated by Dr. Haverbush at the Lakeview Community Wellness Center in Lakeview or at the office in Alma at 315 Warwick Dr., Alma, Michigan.

Please call 989-463-6092 for information or to schedule an appointment.

Future Lakeview Community Wellness Center Clinic dates are March 20, and April 3, 2009.

Please don’t forget there is a wealth of accurate information about all the Orthopaedic conditions I treat on the office teaching website [www.orthopodsurgeon.com](http://www.orthopodsurgeon.com). Please log on and check it out.

We are happy to answer questions from readers. You can e-mail me at orthopodsurgeon@hotmail.com or write to me at 315 Warwick Dr., Alma, Michigan 48801.

Our goal is simple – To help people return to more pain free functional lives.
Good health. Good life. All the best to you.

Be well.

Dr. Haverbush