



ULNAR NERVE DECOMPRESSION

There are a number of different treatment options for this condition. Firstly the patient is often treated conservatively with some anti-inflammatory medication and physiotherapy for hand exercises. This usually occurs if your symptoms are mild. The majority of patients will improve with this treatment. If the symptoms become progressive or there are signs of weakness within the hand the neurosurgery team may offer you an operation.

There are two major reasons for having the operation:

1. To improve the preoperative numbness.
2. To prevent any further weakness occurring in the hand. If weakness is already present, any improvement is cast as a bonus of the operation.

OPERATION

The operation can be performed under local or general anaesthetic. It involves a small cut around the elbow and freeing up of the nerve in the major spots that it becomes compressed. It is usually a day procedure and you go home with follow up by the neurosurgical team.

Risks of this procedure

- Superficial - involving the wound, or too deep involving the joint (extremely rare).
- Bleeding, which may require drainage
- Damage to nerves - the medial cutaneous nerve of the forearm which may result in numbness over the inner aspect of the forearm.
- Damage to the ulnar nerve itself, which may result in weakness of the muscles of the hand as well as numbness in the medial figures of the hand.
- Failure of symptoms to improve.
- Tenderness around the scar and longterm discomfort in the elbow – these may be permanent.

The day after surgery you should remove the bandage and cotton-wool from your hand, but leave intact the “plastic dressing” which covers your hand. You may then use your hand in a natural way, opening and closing your hand as much as possible and performing simple light tasks, but avoiding heavy lifting or repetitive use of your hand until the stitches are removed. You may shower as usual provided you take care to keep your hand dry.

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