

Carpal Tunnel Syndrome: What Do You Know About It?

Dr. Darin “Dutch” Workman

In my work with drummers and percussionists, and in my capacity as the Health & Wellness Chairman of the Percussive Arts Society, I have found that carpal tunnel syndrome (CTS) is one of the most predominant injuries we as drummers/percussionists face. Not only is it very widespread, but it is also one of the most difficult to heal because musicians deal with the pain much too long before getting care.

Even at that point proper healing is possible, but the treatment is long and fairly painful. As a general rule, most musicians (and people in general) don't have the patience to complete the treatment, and/or they will not make the changes needed to stop the continued irritation to the carpal tunnel.

This article should answer most of your questions on CTS. It will allow the reader to understand the basic concepts of CTS, and learn some basic ways to spot it and take care of it. I am going to try a different approach with this article by giving you the short version for those who just want the facts. For those of you that want to know more information, please contact me at docworkman@juno.com.

Although the more obvious symptoms of CTS are many, varied, and not always consistent, the usual appearance consists of numb, tingling or achy feeling in the hand and/or wrist (usually thumb and first finger.) It gets worse over weeks or months and during or shortly after repeated stressful motions of the hand or wrist.

DESCRIPTION

CTS is the irritation of the median nerve as it goes through the carpal tunnel (see illustration below). Overactive or inefficient tendon movement through the tunnels causes heat, swelling, and increased pressure.



Tendons that operate the fingers go across the wrist on the palm side through “carpal tunnels” (“X”) on the right. Illustration is used with permission from McNeil Pharmaceuticals.

CAUSE

Commonly from long-term misuse (microtrauma) of the wrist for a period of weeks, or months. Other causes are sudden increase in speed, practice time, stick size, tighter heads, change in instrument set up, etc.

TREATMENT

For immediate relief, ice the wrist for 15 minutes on and 15 minutes off in an elevated position (above the heart). Take aspirin or ibuprofen as directed on the package. When practicing, rest 10 minutes of each hour. Soft tissue work may be done on the wrist flexor muscles to lengthen them, decreasing pressure on the tendons and the tunnel.

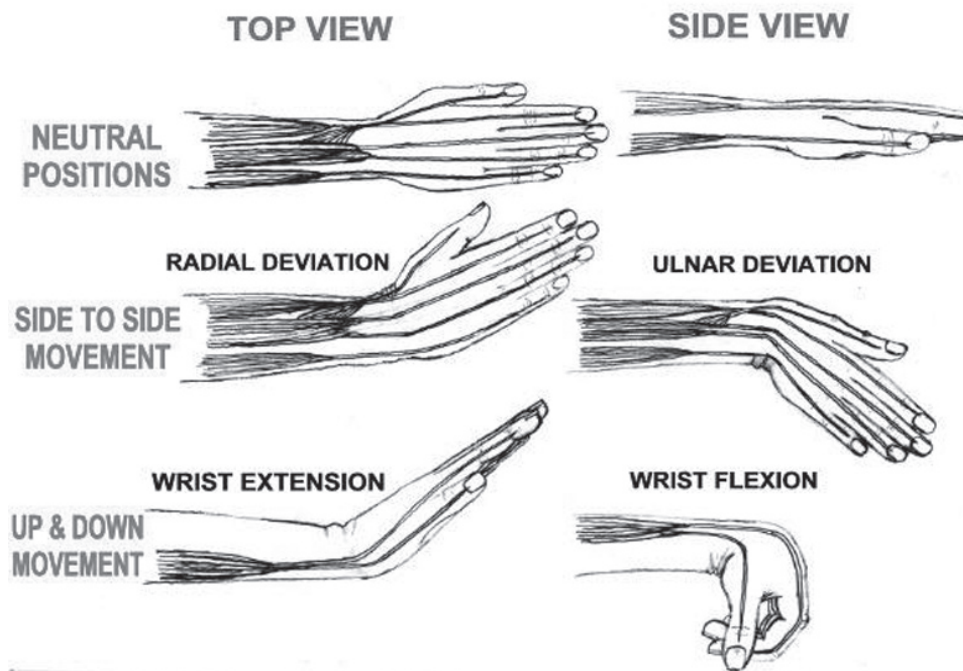
PREVENTION

Technique: Try using more finger and arm movement with less wrist movement. Also consider using more wrist rotation. Do half of your speed, and length of playing for three days. Finally, let the sticks do more of the work—don't try to control them. Flip the stick, and let it swing—bouncing independent of your hand (like bouncing a basketball).

Carpal Tunnel Syndrome

Exercises: You may try shoulder shrugs.

Stretches: Four times per day do stretches as illustrated below:



Above are various motions of the wrist. All positions except neutral (top row) cause the tendons to rub harder against the carpal tunnels. Greater angles and/or muscle tension cause greater irritation. Illustrations by Dr. Darin "Dutch" Workman.

IF NO RELIEF

If no relief within two weeks of the above treatment, see your doctor for evaluation.

PROGNOSIS

If you catch the injury early (within 4 weeks) the prognosis is excellent, but by 12 weeks and after, the chances for full recovery decrease.

OTHER POSSIBILITIES

Your pain could be caused by something other than CTS. Two possibilities come to mind:

- Carpal tunnel tendonitis (pain when wrist straight during resisted flexion)
- Ulnar nerve entrapment (tingle/numbness - mostly in the pinkie finger).

Dr. Darin "Dutch" Workman is a doctor of chiropractic practicing in Kingwood, Texas (Houston area). He works with performing and sports related injuries. He has also received his Bachelor of Human Biology degree and is a Certified Chiropractic Sports Physician. Dr. Workman has authored numerous injury and prevention articles over the years and is currently finishing a book on ergonomics, including the prevention and treatment of drumming injuries. He is the chairman of the Percussive Arts Society Health and Wellness Committee, and is a member of the Performing Arts Medical Association. For additional information, Dr. Workman can be reached at docworkman@juno.com.