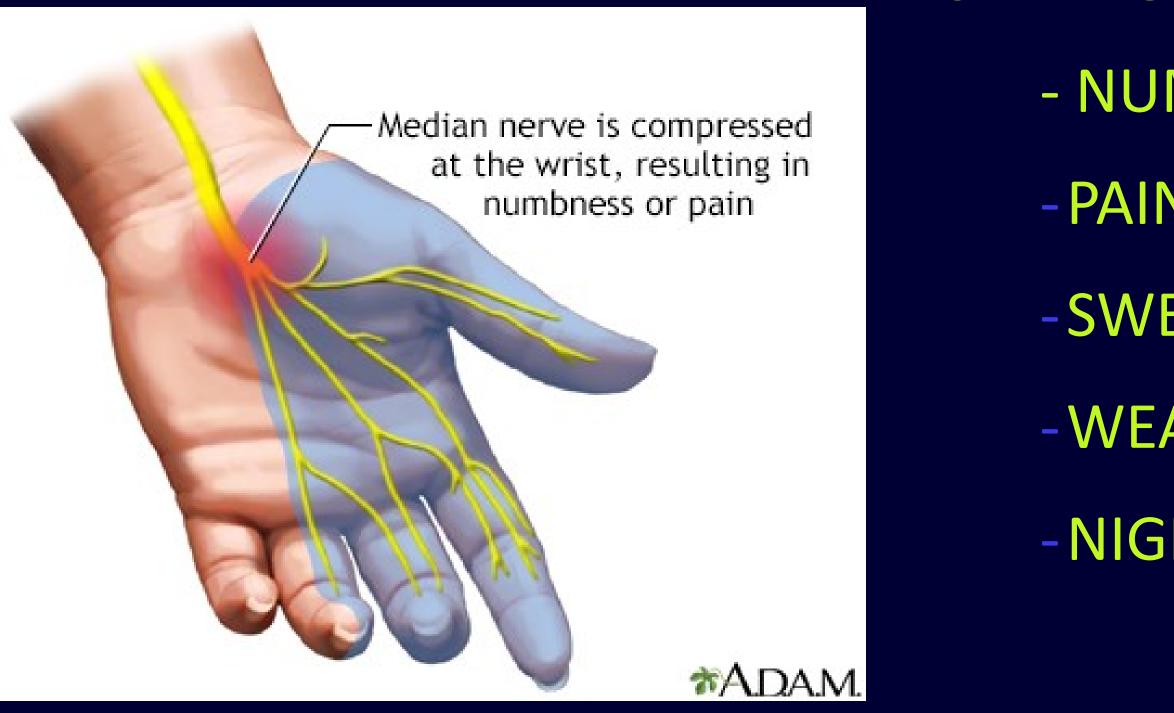


### Workplace Injuries Hand to Elbow DR. SCHRAMM, OSMC

Carpal Tunnel Syndrome Cubital Tunnel Syndrome Radial Tunnel Syndrome Proximal Median Nerve Compression

### **Compressive Neuropathies**



## Carpal Tunnel Symptoms

### SYMPTOMS

- NUMBNESS in Thumb, Index, Middle Fingers
- PAIN in wrist
- -SWELLING
- -WEAKNESS
- NIGHTTIME AWAKENING



## Carpal Tunnel Syndrome



### CAUSES

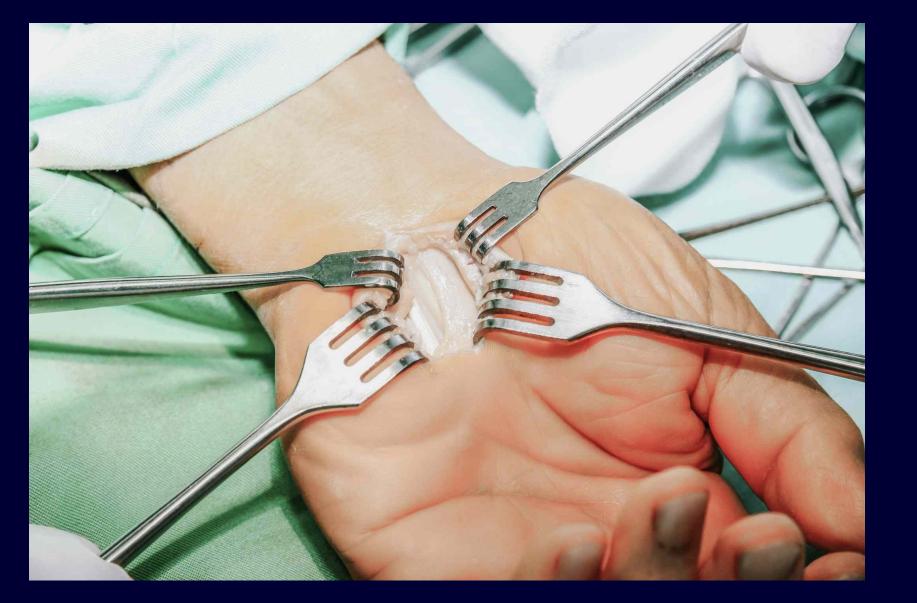
- Repetitive tasks
  - Typing, Gripping, etc.
- Takes time (3 months etc)

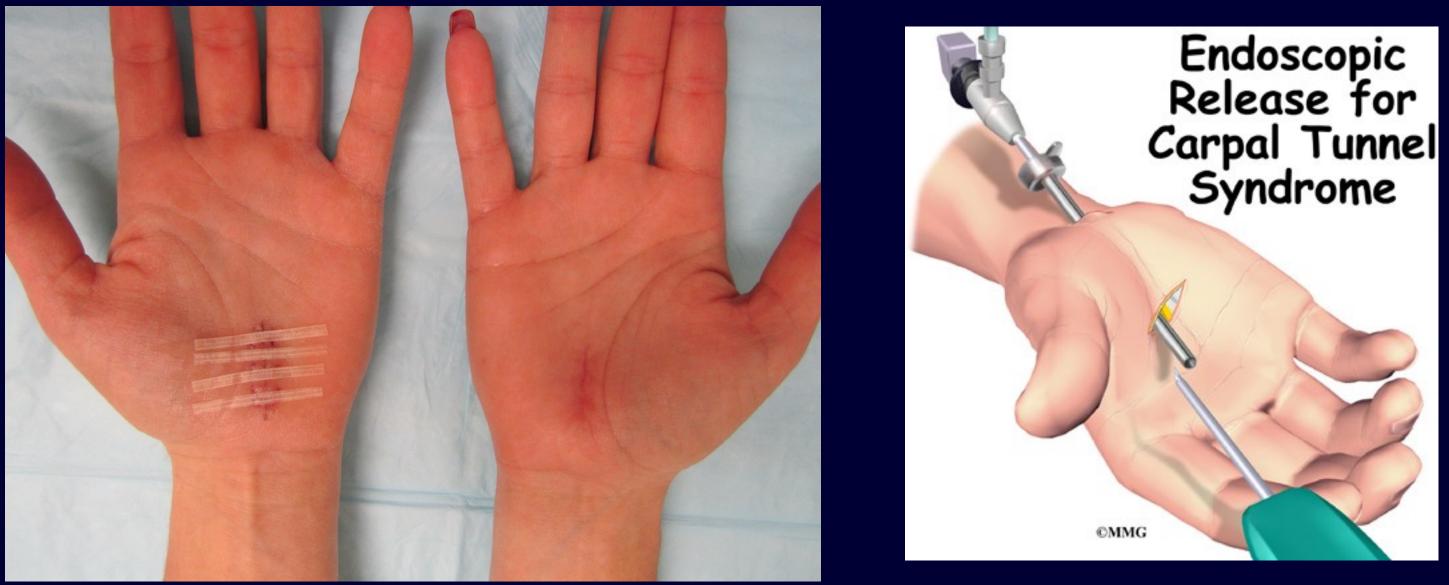
### PREVENTION

- Ergonomical work station
- Frequent breaks
- Stretching



### Treatments for Mild Disease





### Treatment Moderate/Severe Carpal Tunnel





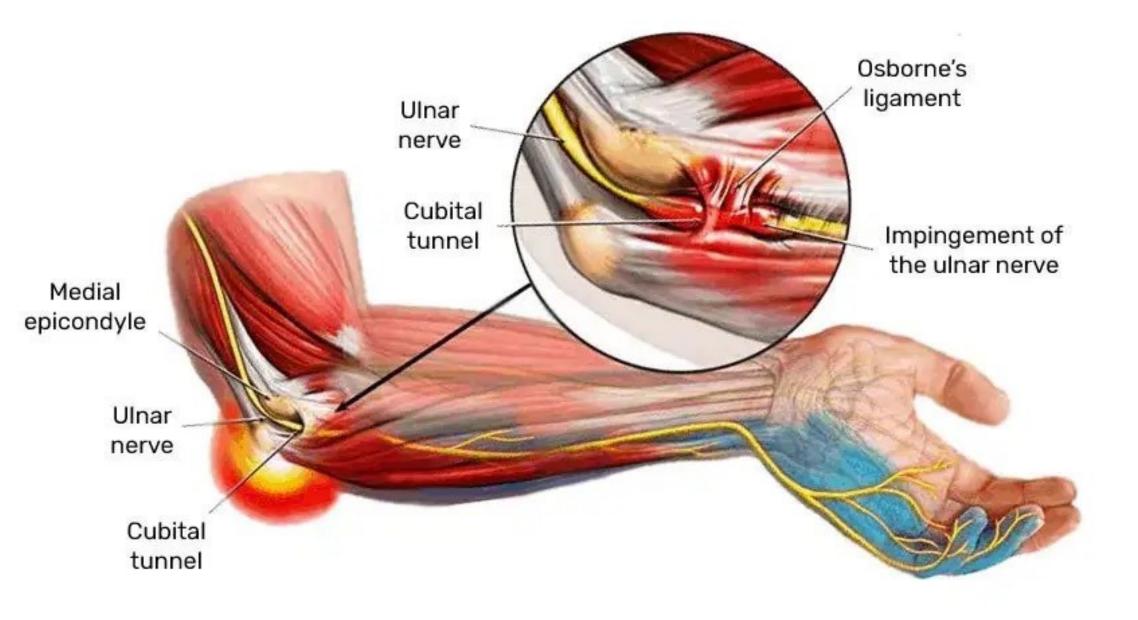
Time off work: 1-3 days

Restrictions: No use/light use (< 2 lb) for 2-6 wks

Time to MMI: 6 wks

Why does it take longer to return sometimes? - Severe compression with weakness - Incisional tenderness

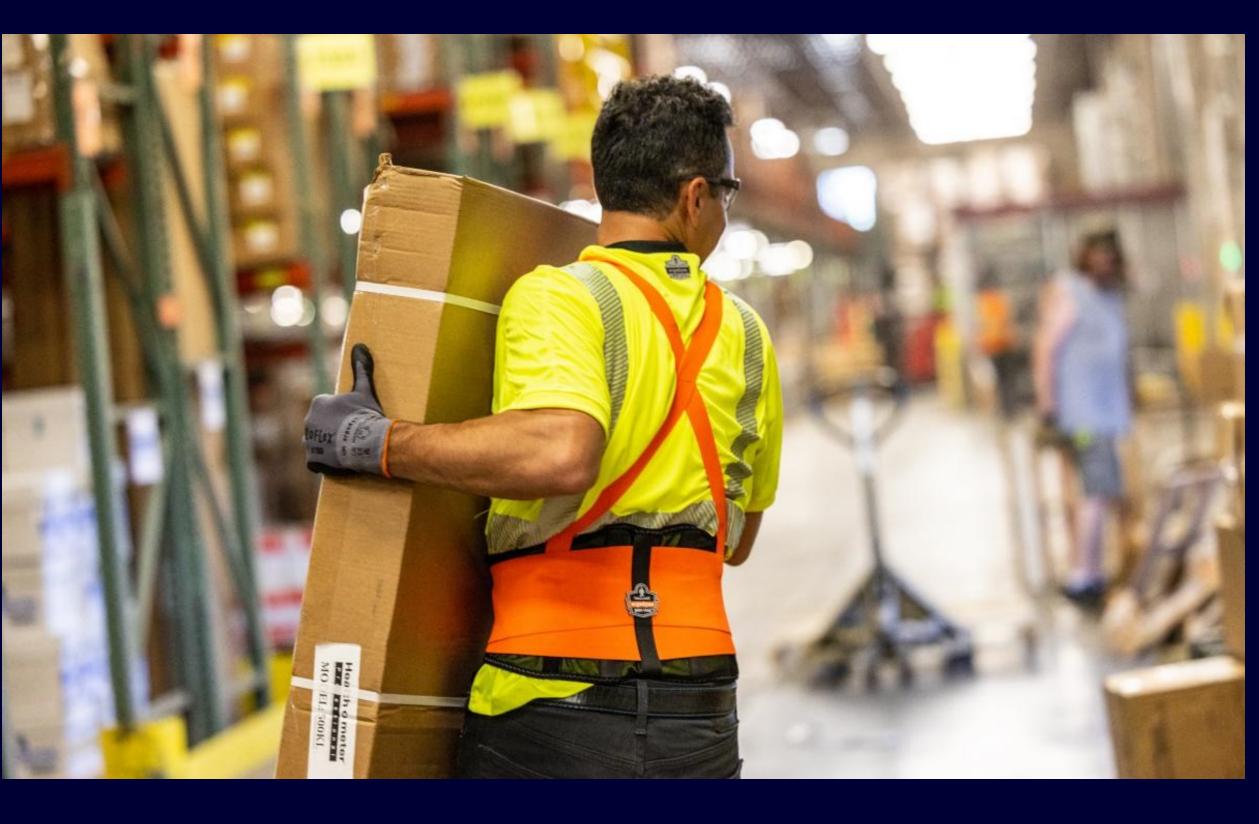
### Carpal Tunnel Rehab



## Cubital Tunnel Symptoms

### SYMPTOMS

- Numbness in Ring and Little Fingers
- Weakness in Grasping, Fine Motor Activities
- Forearm pain/aching



### Cubital Tunnel Causes

### CAUSES

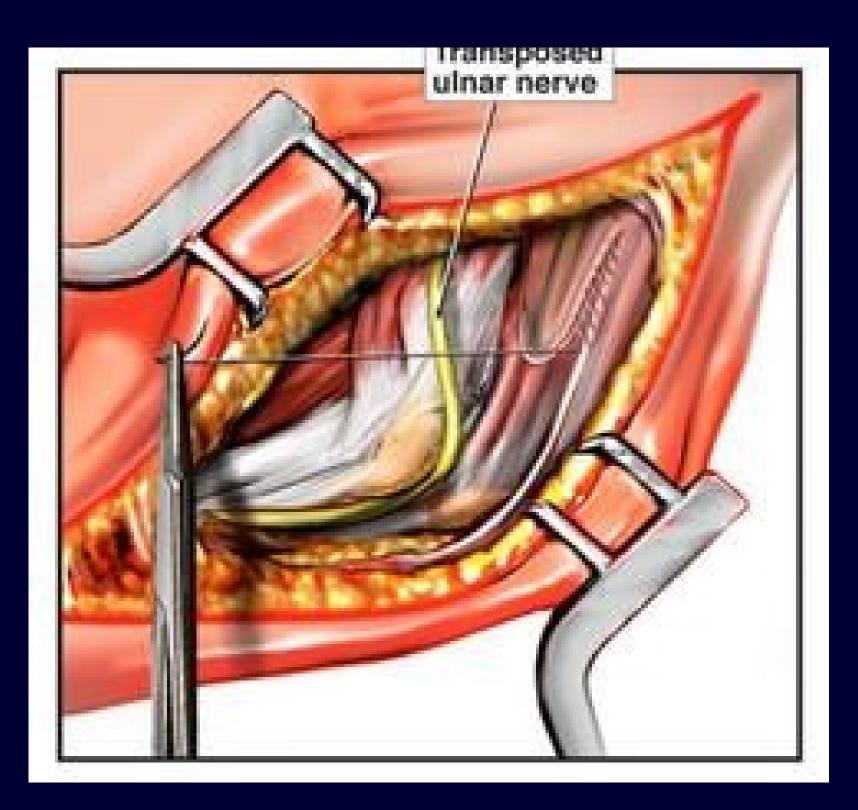
- Repetitive tasks
  Lifting, Gripping, etc.
  Direct blow to elbow

  PREVENTION

  Ergonomical work station
  - Frequent breaks
  - Stretching



### Treatment for Mild Disease



**SURGERY** 

- Decompress nerve
- In Situ (leave nerve in groove)
  - Less swelling, change for recurrence
- Anterior Transposition (muscle trough)

### Treatment Moderate/Severe Cubital Tunnel

More swelling, slightly longer recovery

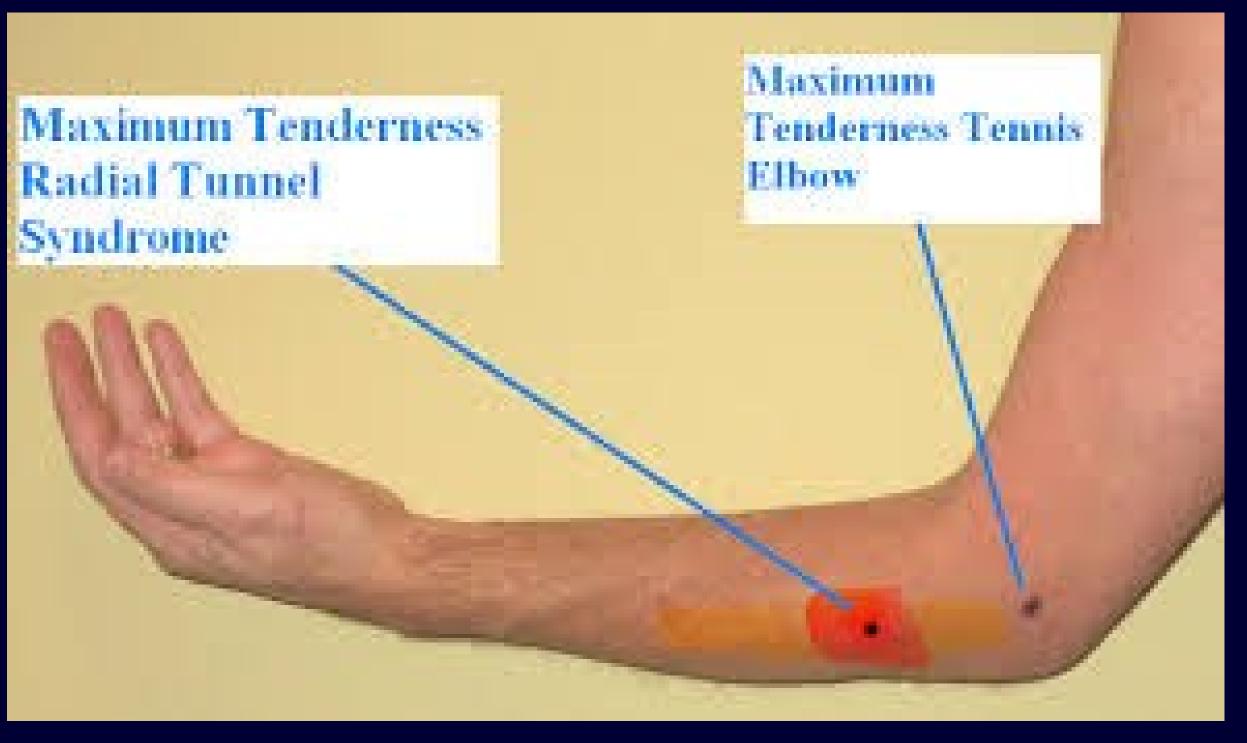
Time off work: 1-3 days

Restrictions: No use/light use (< 2 lb) for 2-6 wks

Time to MMI: 6-8 wks

Why does it take longer to return sometimes? - Severe compression with weakness - Therapy necessary to strengthen small hand muscles

### Cubital Tunnel Rehab



### Radial Tunnel Syndrome

### SYMPTOMS

- Pain in dorsal forearm
- Weakness in wrist/finger extension

### PREVENTION

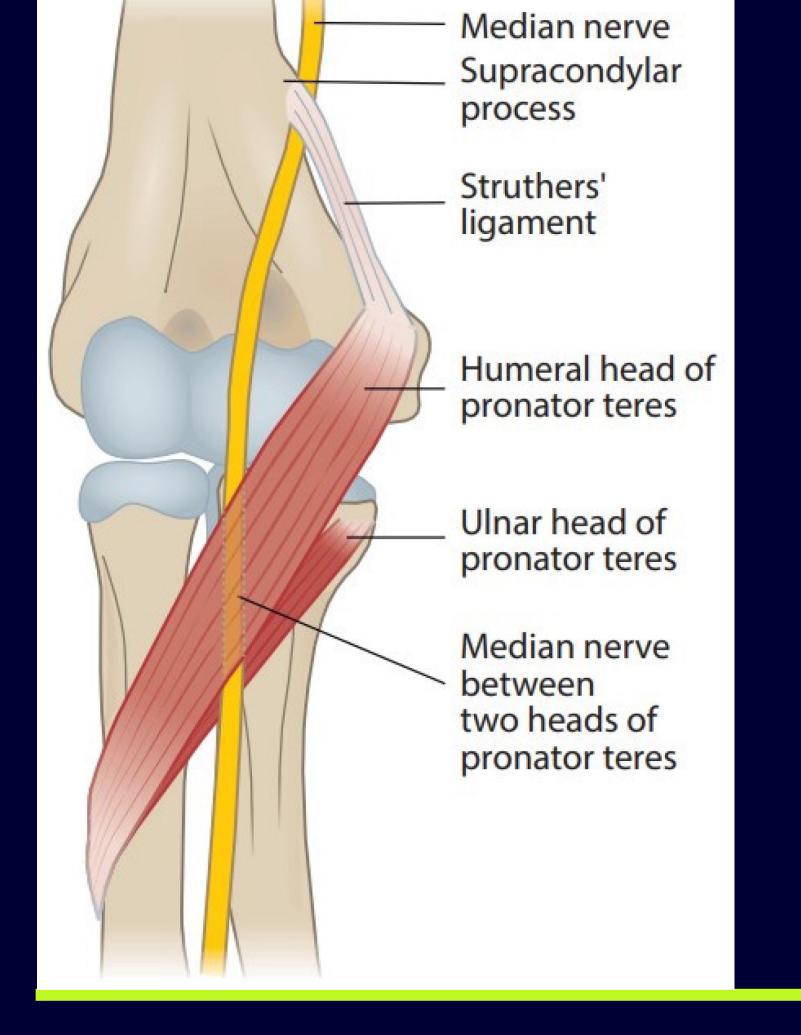
- Ergonomical work station
- Frequent breaks
- Stretching



### Radial Tunnel Treatment

### TREATMENT

- Therapy (almost always)
- Nerve medication (short term)
  - 3 months
- Rarely surgery
- TIME TO MMI: 3 months



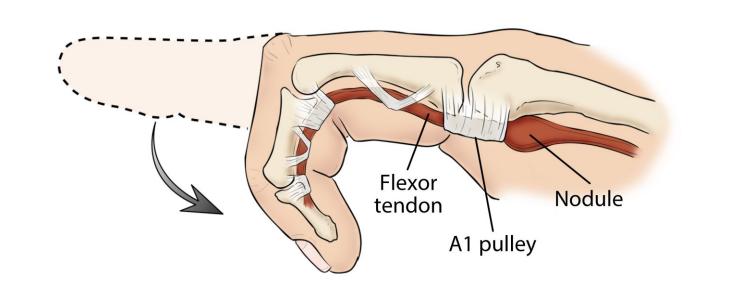
RARE Treatment

## Proximal Median Nerve Compression

- Therapy (ASTYM)
- Surgery rarely indicated
- TIME TO MMI: 3 MONTHS

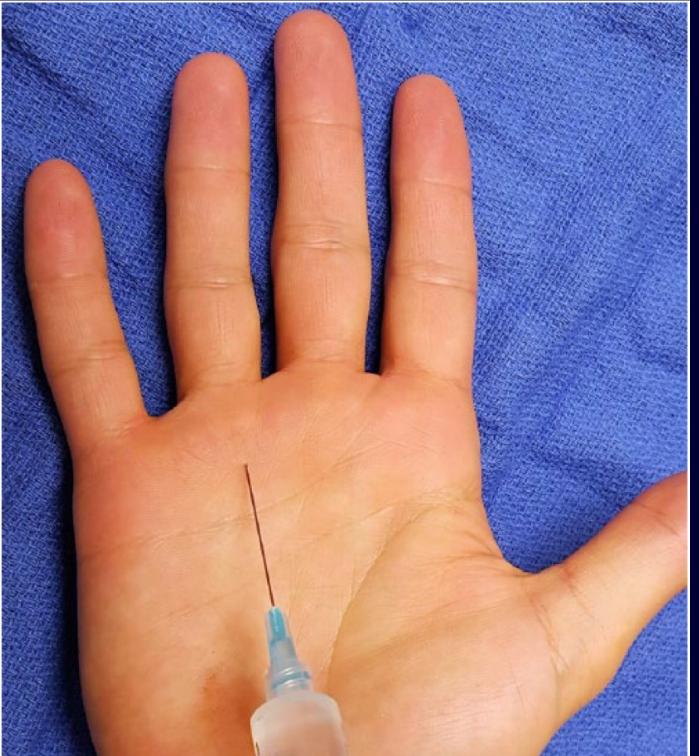


CAUSES • Repetitive tasks



## Trigger Fingers

- Pulling, Gripping, etc.
- Crush Injury/Trauma to palm of hand

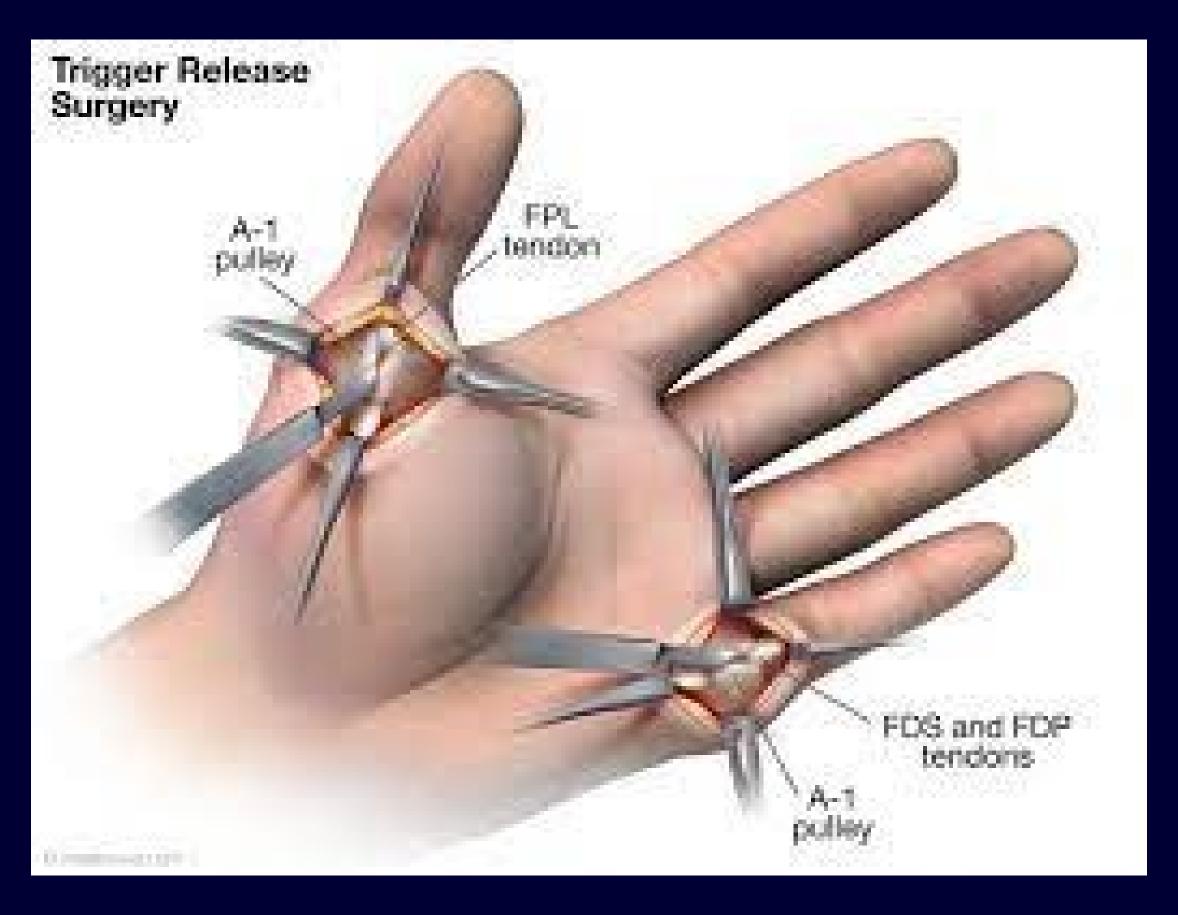


# Cont Les

## Trigger Finger Treatment

### **INITIAL TREATMENT**

- Injection steroid in tendon sheath
  - Success rate 50%
  - Repeat injection x 1 possible
- Control Swelling
  - Less repetitive grasping



## Trigger Finger Treatment

### SURGERY

- Release A1 pulley
- THERAPY
  - Necessary to improve tendon gliding
  - Often swelling and stiffness
    - More than 1 finger, crush injury, etc.

Time off work: 1-3 days

Restrictions: No use/light use (< 2 lb) for 2-6 wks

Time to MMI: 6-8 wks

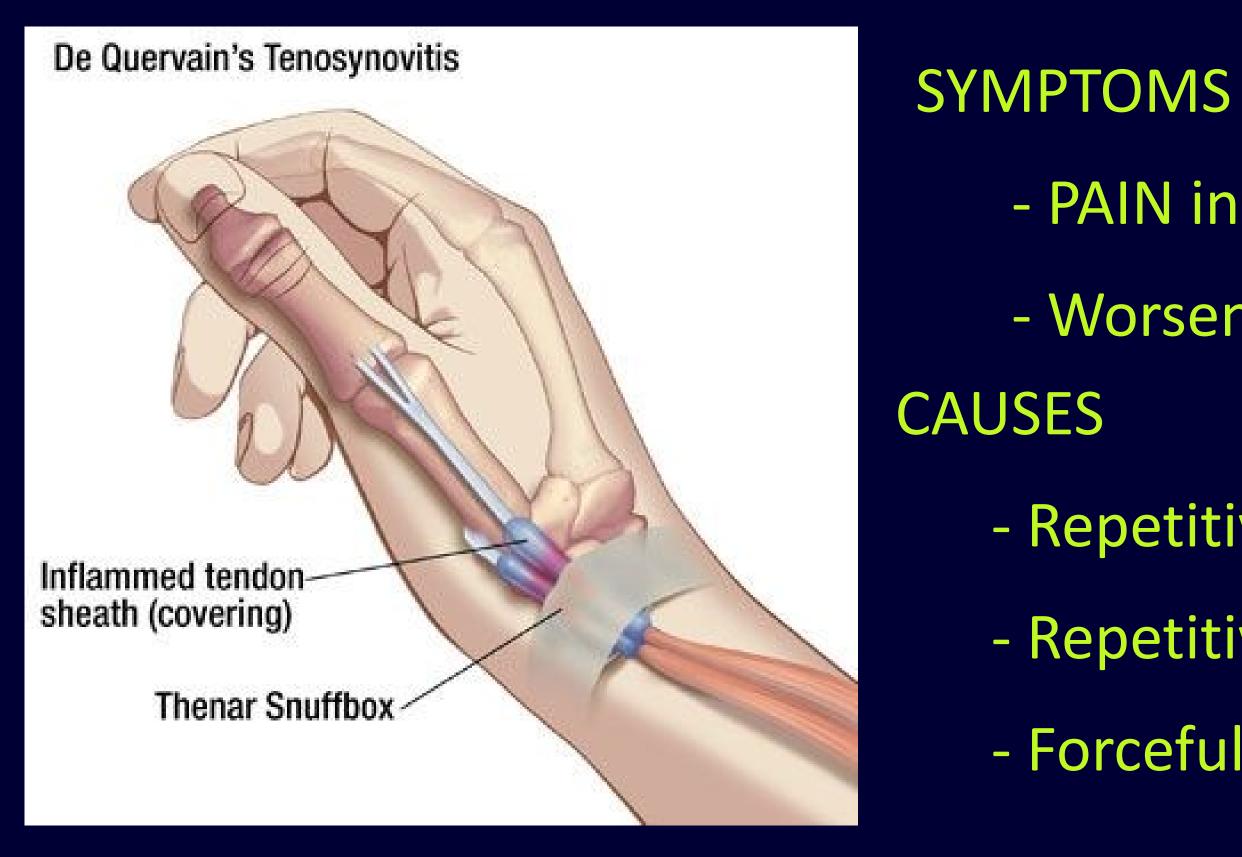
Why does it take longer to return sometimes? - Multiple fingers

- Crush injury
- Flexion contracture from chronic flexion deformity
- Scarring/Palmar fibrzomatosis

## Trigger Finger Rehab

DeQuervain's Tenosynovitis Lateral Epicondylitis (Tennis Elbow) Medial Epicondylitis (Golfer's Elbow) FCR, ECU, ECRL/B Tendonitis

### Tendonitis Wrist to Elbow



## DeQuervain's Tenosynovitis

- PAIN in dorsal radial wrist
- Worsened with radial deviation
- Repetitive lifting
- Repetitive grasping
- Forceful blow to wrist



## Treatment DeQuervain's Tenosynovitis

### **INITIAL TREATMENT**

- Injection steroid in tendon sheath
  - Success rate 50%
  - Not recommend repeat injections
- Splinting
- Activity modification (no wrist bending)







### **SURGERY** THERAPY "roof" of tunnel

- Regaining motion
- Helping tendons to move normally
- Regain strength

## DeQuervain's Surgery

Time off work: 1-3 days Restrictions: No use/light use (< 2 lb) for 2-6 wks

Time to MMI: 6-8 wks

Why does it take longer to return sometimes? - Scarring

## DeQuervain's Tenosynovitis Rehab

### - Nerve irritation (might need nerve medication for 6-8 wks)



## SYMPTOMS PHYSIOLOGY repetitive grasping elbow

## Lateral Epicondylitis

- Pain over outside of elbow (laterally)
- Pain with extending elbow, lifting wrist

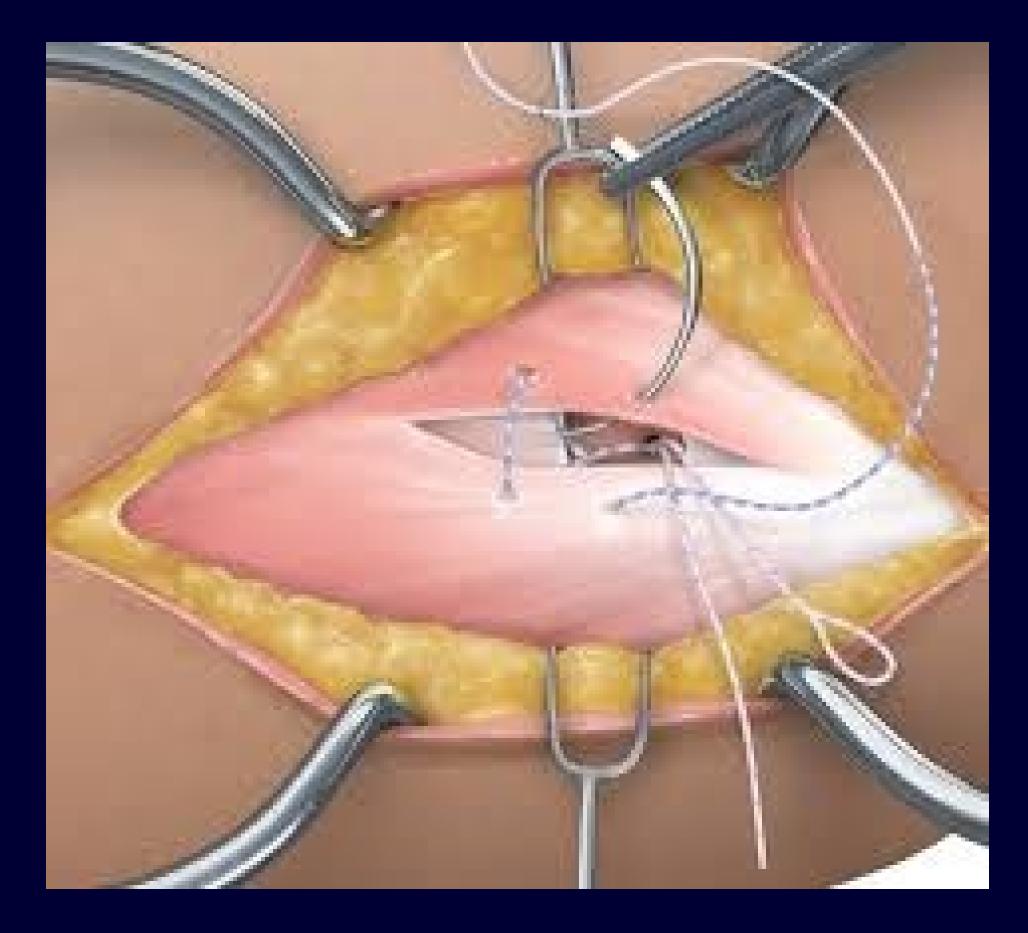
- Micro tearing over extensor origin from epetitive grasping
- Tendon rupture from forceful lifting/blow to



### Lateral Epicondylitis Treatment

### THERAPY

- Ultrasound, Iontophoresis, Stretching
- ASTYM/SASTYM (deep massage)
- BRACING
  - Band bracing (tennis elbow brace)
  - Wrist splinting



SURGERY

## Lateral Epicondylitis Surgery

- Open debridement
- Arthroscopic debridement
- Open debridement with repair of tendon
  - Surgery of choice for repeat surgery

Time off work: 1 week

Restrictions: No use/Wear Splint

- Therapy: Essential for success
- Time to MMI: 3 months
- Why does it take longer to return sometimes?

### Lateral Epicondylitis Rehab

## - Need for heavy lifting (need long time in therapy for strengthening)



## Medial Epicondylitis

### SYMPTOMS

- Pain over outside of elbow (medially)
- Pain with forearm pronation

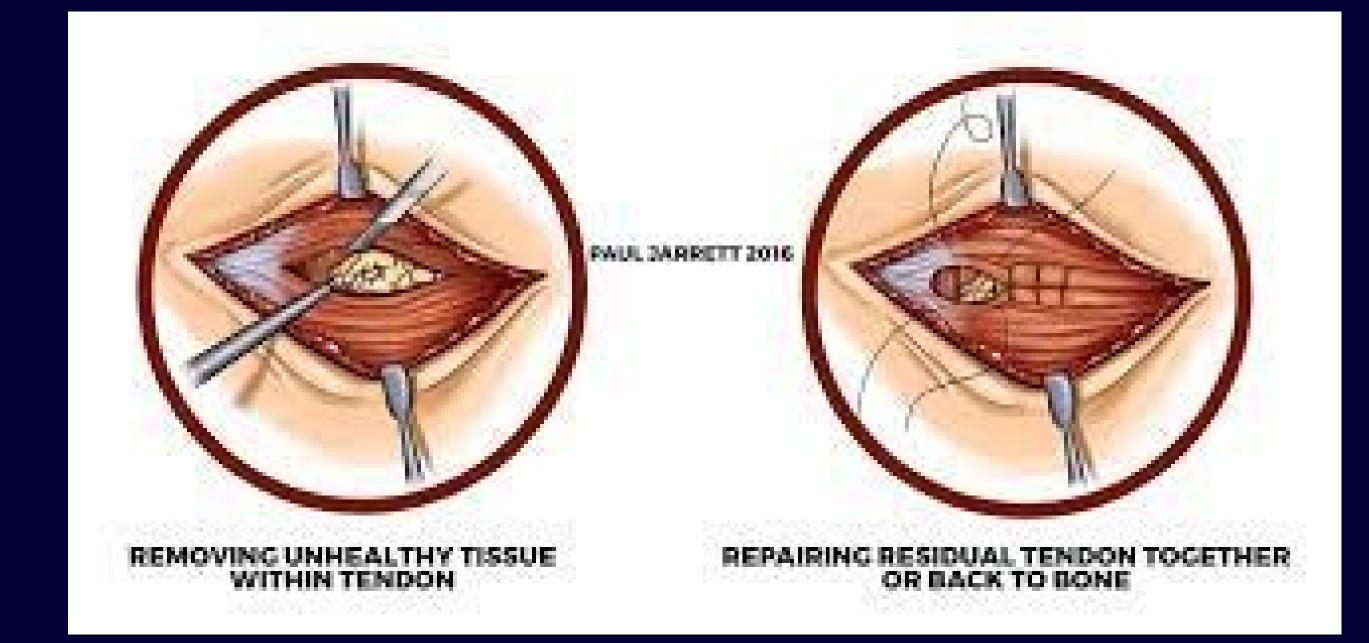


### THERAPY



## Medial Epicondylitis Treatment

- Ultrasound, Iontophoresis, Stretching
- ASTYM/SASTYM (deep massage)
- BRACING
  - Band bracing
  - Wrist splinting
  - Compression sleeve



## Medial Epicondylitis Surgery

### SURGERY

- Rarely needed
- Debridement and repair of tendon

Time off work: 1 week

Restrictions: No use/Wear Splint

- Therapy: Essential for success
- Time to MMI: 3 months
- Why does it take longer to return sometimes?

### Medial Epicondylitis Rehab

### - Need for heavy lifting (need long time in therapy for strengthening)



Proximal Phalanx

Middle Phalanx

## Finger Fractures/Dislocations





**Distal Phalanx** 

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### Proximal Phalanx

- ORIF vs. Buddy Tape - Early Motion - Therapy Early - Will have loss of motion



## Finger Fractures/Dislocations

### Middle Phalanx

- ORIF vs. Splinting
  Guarded motion
- Therapy
- Will have loss of motion

## Finger Fractures/Dislocations



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### Distal Phalanx

Usually Splint
Occasional ORIF
Nail deformities

## Finger Fractures/Dislocations





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Time off work: 1 day distal, 3-5 days middle/proximal Restrictions: No use, Wear splint/buddy tape Therapy: Essential for regaining motion Time to MMI: 6-8 wks distal, 3 months middle/proximal

# Finger Fractures/Dislocations

- PPI: Based on fracture, loss of motion, soft tissue loss, sensation loss

Metacarpal Fractures Scaphoid Fractures Carpal Fractures Dislocations

### Hand Fractures





Transverse

Boxer's/Distal

## Hand Fractures



### Oblique





### **ORIF transverse fractures**

## Hand Fractures



### Buddy Tape stable fractures



Time off work: 1 day stable, 1 week unstable requiring ORIF Restrictions: No use, Wear splint/buddy tape Therapy: Essential for regaining motion Time to MMI: 3 months **PPI:** Anticipate loss of motion

### Hand Fractures







**Distal pole** 

# Scaphoid Fractures



### Middle/waist

Proximal pole











Middle - Screw

### Proximal pole - Screw/PRC

## Scaphoid Fracture Treatment

Time off work: 1 day distal, 1 wk middle/proximal Restrictions: No use, Cast Therapy: Essential for regaining motion Time to MMI: 3 months distal, 6 months middle/proximal PPI: Loss of motion, Nonunion

## Scaphoid Fractures

### Radius/Ulna Shaft

Distal Radius

Distal Ulnar

### Wrist Fractures

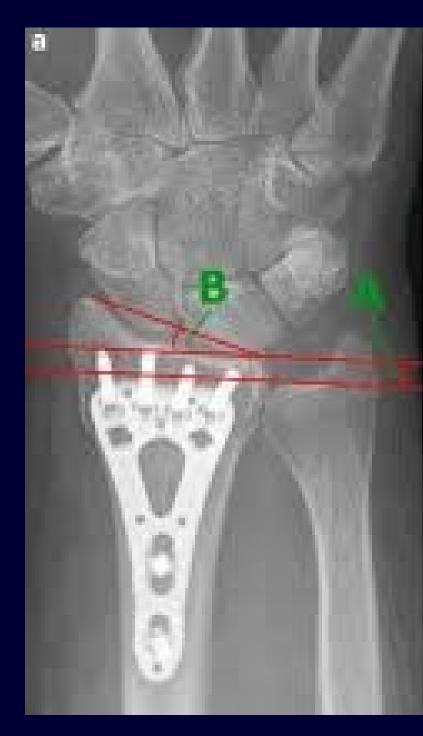


## Radius/Ulna Shaft

### Shaft Fractures

- Usually ORIF (10 degree angulation limit) - Splint 6 wks - Usually minimal PPI and 8-12 wks to full MMI





### **Distal Radius - ORIF**

## Distal Radius vs. Distal Ulna





### Distal Ulna - Splint

Time off work: 1 wk Restrictions: No use, Splint Therapy: Essential for regaining motion Time to MMI: 3 months PPI: Loss of motion

### Wrist Fractures

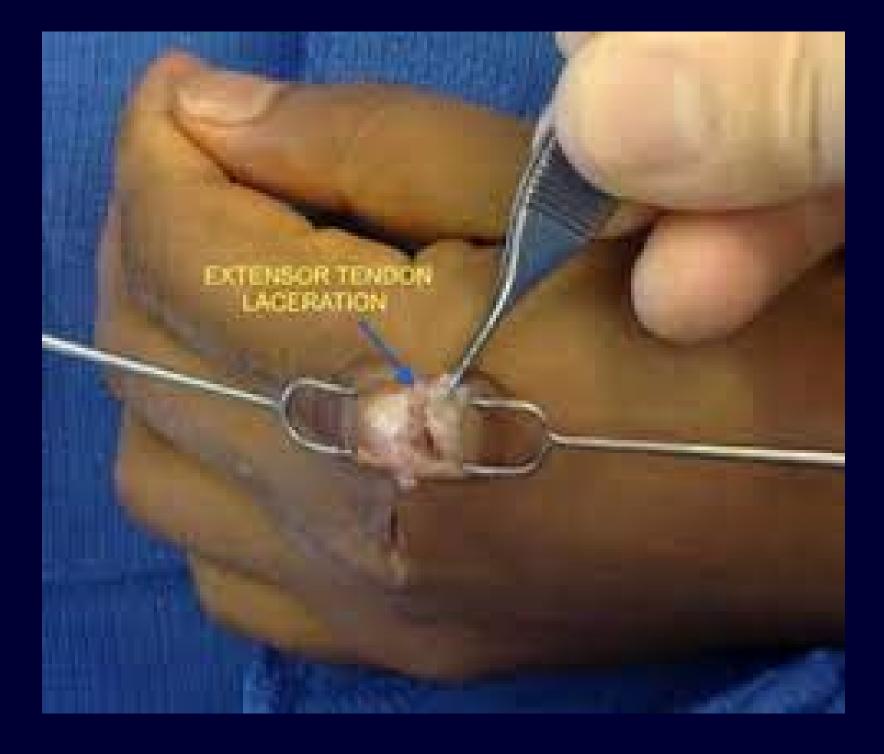


### **Extensor Tendon Laceration**

# **Tendon Lacerations Finger**



### Flexor Tendon Laceration



### **Extensor Tendon Repair**

# Tendon Laceration Finger



Flexor Tendon Repair

### Extensor repair

- Repair then Splint
- Start motion 4 wks
- Short Course Therapy
- Anticipate near full recovery

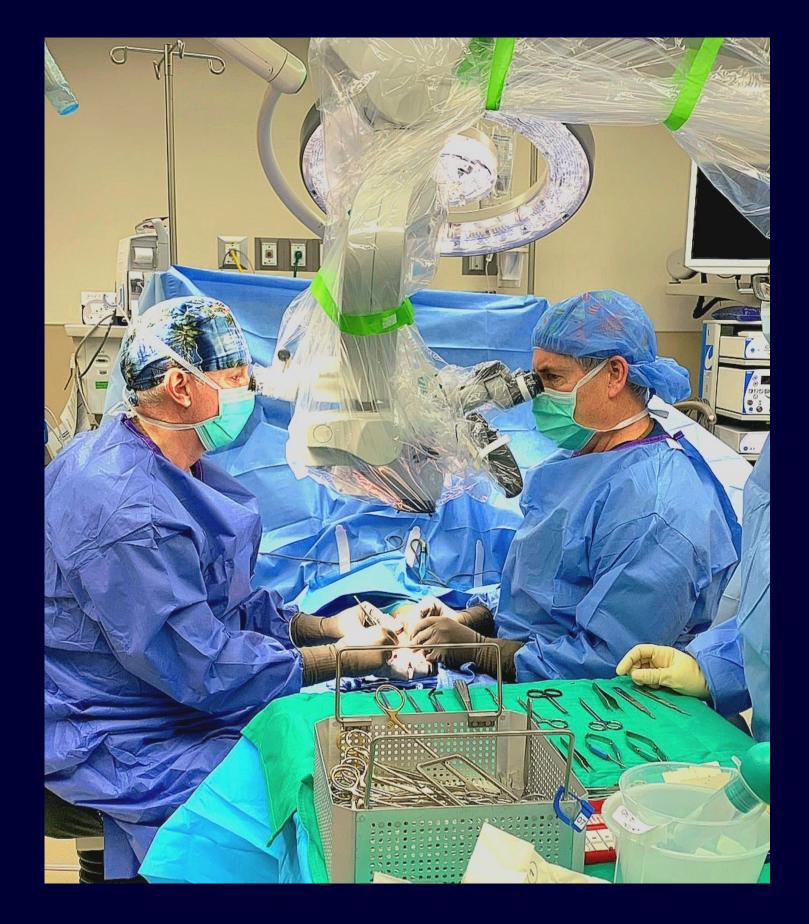
### Extensor vs. Flexor Tendon

### Flexor repair

- Repair then Splint
- Start motion 3-5 days
- Extended Therapy
- Anticipate loss of motion and 50% chance repeat surgery for scar/rerupture



### Nerve Lacerations Hand



Time off work: 1 wk Restrictions: No use, Splint Therapy: Essential for regaining motion, sensitivity Time to MMI: 3 - 6 months **PPI:** Incomplete recovery of sensation

### Nerve Laceration Hand

Use Guide for Permanent Disability Goal - No PPI and no restrictions PPI ratings follow severity of injury

## PPI Ratings

## Thank you!!



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