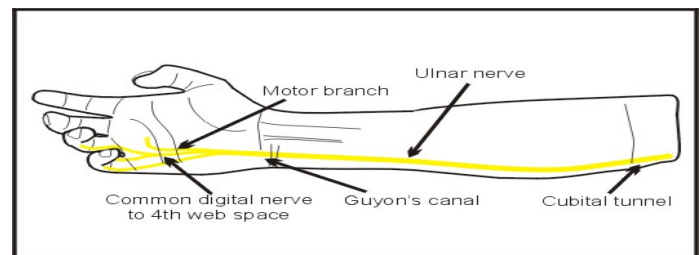


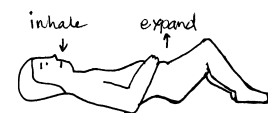
Ulnar Tunnel Program

Compression of the Ulnar Nerve may cause numbness in the small and ring finger. It may also cause tingling from the inner elbow at the “funny bone” especially when tapped with your other hand.

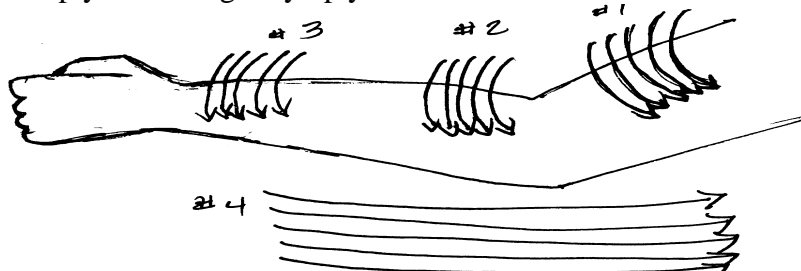
There are many things you can do to help reduce the symptoms. These are a few of the ways that have proven to be helpful to others, short of surgery. If you have questions about these exercises and you have not been to therapy, it is suggested you get a referral from your doctor.



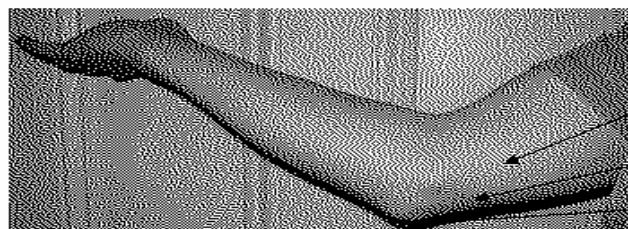
1. **Walk one hour a day**, or do some other cardio-vascular activity that will increase your heart rate above what your normal daily activities provide (swim, dance). This enhances your circulation. Work up to the hour over 2-3 weeks if this is not part of your daily routine. Check with your MD if there is any question about your ability to do this.
2. **Drink 8 glasses of water/fluid daily** – no coffee, tea or soda as these have caffeine and sodium which tend to dehydrate the body. Herbal tea is OK. The water helps to flush your system and add oxygen. You can try drinking a glass of water if you wake up in the middle of the night with numb hands.
3. **Diaphragmatically breathe for 10 minutes, twice daily.** This involves lying on your back, knees bent, and hands resting on stomach. As you breathe in, you want your hands and stomach to lift up; as you breathe out, your stomach should pull in. This is a slow rhythmical process, not rushed. Eventually, you can do this in a seated or standing position. Circulation is aided by this activity. Stress can also be reduced with this exercise.



4. **Manual Edema Mobilization or Horseshoes and Sweeps**, stimulate the lymphatic system so that tissues can heal. If you have active cancer, you should most likely avoid this exercise as it affects the lymphatic system. You begin by placing one full hand, not just the fingers, gently across the front of the upper arm and moving it in a horseshoe pattern 5 times. You then move your hand approximately 4 inches down the arm and repeat the same thing, and do this once more at the wrist. Next, you sweep your hand gently up your arm. This should be done twice daily for 5 minutes.



5. **Nerve glides are also important; however, do not do these after surgery.** Stand tall in good posture with shoulders relaxed. Hold the affected arm by your side with the elbow bent and palm facing upward, as if carrying a tray. The wrist is bent back (wrist extended); you can leave the wrist straight if this causes pain. Slowly raise your arm up with the elbow bent and shoulder remaining relaxed. Stop when you begin to feel an increase of tingling. Lower your arm about 20 degrees. Slowly side bend your head to the opposite side 3 times, keeping your shoulder relaxed. Do this nerve glide 2 times a day.



'Funny bone' or medial epicondyle

Nerve compressed here

Tip of elbow

6. **Resting position** is with the hands resting in the lap, palm up. This puts minimal stretch on the nerve.
7. There are many expensive elbow splints on the market, but an inexpensive yet effective method **to prevent sleeping with elbows flexed** is to wrap a fluffy towel around your elbow and secure it with Duct tape at night.



8. **Throughout the day you should do stretches.** If you are at work on a computer or in the same position for extended periods of time, you should stretch for 5-10 seconds every 15 minutes. Your stretches should be in the opposite pattern of you work position. Remember, no sharp pains should occur with stretching and what you do to one side of the body you will need to repeat on the opposite side. Initially, you may need a timer to help you develop the 15 minute habit.



Figure 9.



Figure 10.



Figure 11.



Figure 12.



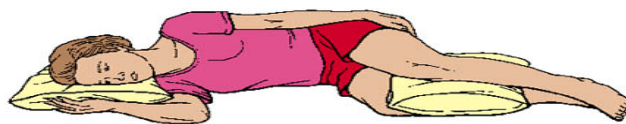
Figure 13.



Figure 14.



9. **Moist heat (or ice)** along the painful area is often helpful. Heat is useful prior to stretching and to aid in circulation. Nerves seem to be more comfortable with moist heat than ice for the most part, as the heat increases circulation and oxygen to the tissues. If your sensation is impaired, use care to not burn yourself.
10. If you sleep on your side, support your free arm on your side and thigh so that you are not compressing the nerve with your shoulder position. You can also use a couple of pillows in front of you and pull your elbow forward onto the pillows if hooking the elbow over your waist is uncomfortable. This will help prevent compression of the nerves high up in your arm and shoulder.



11. **Body Mechanics are important.** A work site evaluation may often be done if the injury is work related. Ulnar tunnel syndrome is aggravated by activities that are repetitive, forceful, vibratory, or torsional/twisting in nature. Bending any joint (neck, shoulder, elbow, and wrist) beyond neutral position for extended periods of time will impact the nerve and cause compression. Holding your elbow in a bent position for extended periods of time can compress the nerve. You can think of a garden hose being bent and restricting water flow; the same thing can happen to the nerve in your arm. It is also important not to rest your elbow on hard surfaces and avoid overhead activities for long periods of time. Do not rest wrist on hard surface when using the mouse. Use a small bean bag under the small finger side of palm with mouse work. These are positions to **avoid**:



Avoid bending wrist with keyboard use



Avoid bending elbows past 90°



12. **Sometimes vitamins and herbs can help.** Check with your MD about vitamin B6 and Flaxseed oil capsules. Some people have found relief with these additives. Be careful with the additives however, as vitamin B6 is stored in tissues and can become toxic with extended use.

Once you have ulnar tunnel problems, they often can reoccur. Recognizing the cause of the injury can be the most important part of recovery. Avoiding those tasks which cause the pain and finding a different way to do them is the trick. Therapy can sometimes help, although if it does not help, you should see Orthopedic Surgery concerning surgical interventions so that muscle damage does not occur. If your small and ring finger are numb continuously, this is an indication for immediate MD evaluation.

Revised: 9/09, Cathy Noble, OTR/L, CHT