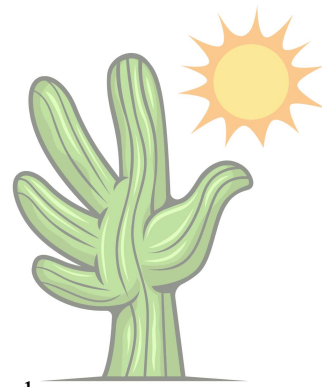


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CUBITAL TUNNEL SYNDROME



What is it?

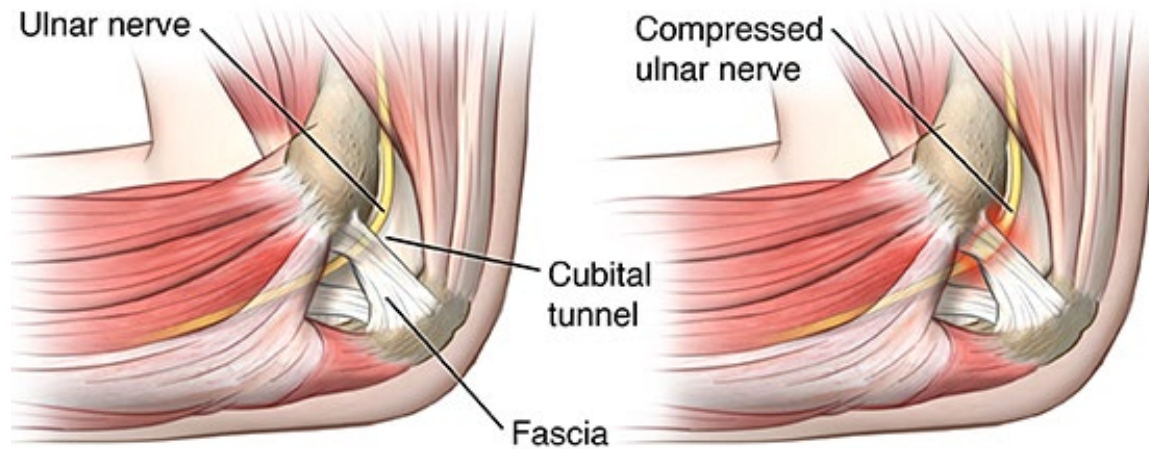
- Cubital Tunnel Syndrome occurs when the Ulnar nerve – the large nerve that travels under your “Funny Bone” (medial epicondyle in your elbow) is compressed by a tight ligament.
- This causes numbness, weakness, and even pain mostly in your small and ring finger.
 - o Chronic Ulnar nerve compression can cause hand dysfunction and clawing.
- Often times patients wake up at night with these symptoms.

Who gets it?

- Second most frequently compressed nerve.
- Can often occur in young muscular men or people who sit with the elbow flexed for long periods of time – like truck drivers or desk workers.
- When the elbow is flexed the Ulnar nerve is pulled tight – causing the nerve to get irritated.

What can you do about it?

- No MRI/CT is needed. Nerve studies may be ordered. 10% of "negative" tests may be positive!
- Elbow extension brace use at night can be very helpful.
- Most patients do not need surgery.
 - o However, surgery is indicated when non-operative management isn't helpful.



Side view of elbow

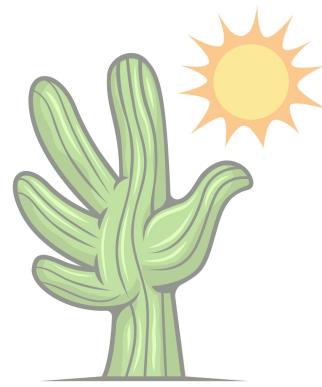
Normal cubital tunnel

**Ulnar nerve compressed
in the cubital tunnel**

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Surgery:

- The surgery involves a 4cm incision on the inside part of the elbow.
- The tight ligament is released so the nerve can function more appropriately.
- I do not move or touch the nerve. I also do not cut the bone. This is minimally invasive surgery.

Post-operative course

- Pain pills may be needed for the first 1-2 nights – but most people will be fine with just Tylenol.
- Four black nylon sutures are removed at the first post-operative visit in 2 weeks.
- This suture is inert (does not react with your body) and is sturdy.
- You can text, type, and do light duties with the hand before the sutures are removed while the dressing is in place.
- After the sutures are removed you can ease back into activity.
- No therapy is needed.

Outcomes

- Many patients will feel a difference within the first two weeks and are very happy with their outcome.

Complications

- Risk of incomplete release, damage to neurovascular structures (which can cause numbness around the incision), infection, and wound complications.
- If you waited a long time to have surgery, your nerve likely experienced many years of compression and may have been partially permanently injured. After a surgical release you may increase a period of increased sensitivity to the fingers. This is usually temporary.