

## Ulnar Nerve Release

### What is Ulnar Nerve Compression?

Ulnar nerve compression at the elbow, also known as **cubital tunnel syndrome**, occurs when the ulnar nerve experiences increased pressure as it passes around the back of the elbow.

Your surgeon has recommended a procedure called **ulnar nerve release** (cubital tunnel release) to relieve this pressure. However, deciding whether to proceed with the surgery is your choice.

This document provides information about the procedure, including its benefits and risks, to help you make an informed decision. If you have any unanswered questions, consult your surgeon or healthcare team. Once all your concerns are addressed and you decide to proceed, you will be asked to sign a consent form. However, you can change your mind at any point before the operation.

### Causes of Ulnar Nerve Compression

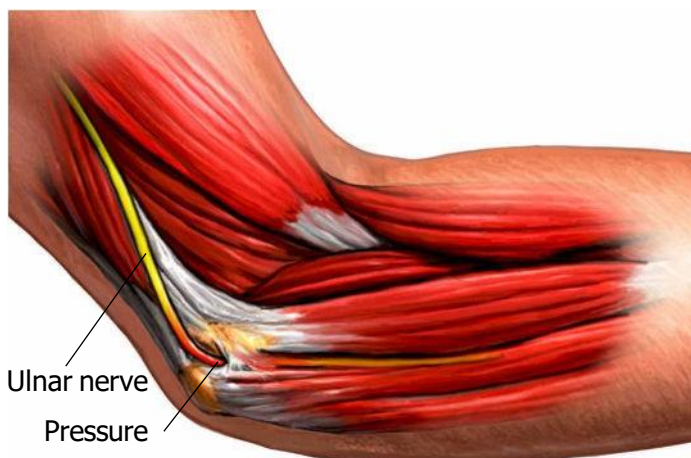
The ulnar nerve runs along the inner side of the elbow, often referred to as the "**funny bone**." It then passes through a narrow tunnel formed by the forearm muscles. If this tunnel becomes too tight, it can exert pressure on the nerve, leading to **numbness or tingling in the ring and little fingers**.

Symptoms are typically worse when the elbow remains bent for prolonged periods.

In some cases, additional diagnostic tests may be needed to confirm the condition.

Potential causes of ulnar nerve compression include:

- **Abnormal muscle bands** over the nerve.
- **Elbow arthritis** leading to structural changes.
- **Repetitive elbow movements** over long periods.
- **No identifiable cause** in many cases.



Ulnar nerve compression

## What Are the Benefits of Surgery?

The primary goal of surgery is to relieve pressure on the ulnar nerve, preventing further damage. If performed early enough, the procedure may improve numbness in the affected fingers.

## Are There Alternatives to Surgery?

For mild symptoms, especially those occurring at night, wearing a splint to keep the elbow straight while sleeping may provide relief. However, if the nerve compression is severe, surgery is often recommended to prevent irreversible nerve damage.

## What Happens if Surgery Is Not Performed?

Prolonged nerve compression can lead to **permanent nerve damage**, resulting in **muscle wasting** in the hand. This can cause lasting **numbness** and **weakness**, making everyday tasks such as buttoning a shirt or tying shoelaces difficult. At this stage, surgery may not fully reverse the damage.

## The Ulnar Nerve Release Procedure

### *Preoperative Preparation*

- Remove any rings from your hand before surgery.
- The healthcare team will verify the procedure details and surgical site before the operation.
- Various anesthetic options are available, and your anesthesiologist will discuss the best option for you.
- Local anesthetic injections may be used to manage postoperative pain.
- Antibiotics may be administered to reduce the risk of infection.
- The procedure typically lasts **30 to 45 minutes**.

### *Surgical Technique*

- An incision is made along the **inner side of the elbow** to access the ulnar nerve.
- Any tight tissues compressing the nerve are released.
- In some cases, **a small section of bone may be removed**, or the **nerve may be repositioned** to the front of the elbow.
- The incision is then closed with **stitches or surgical clips**.

## Medication Considerations

Inform your healthcare team about all medications you take, including:

- **Blood-thinning medications**
- **Herbal supplements**
- **Over-the-counter pain relievers**

Follow their guidance regarding medication adjustments before and after surgery.

## Preoperative Preparation

To improve your recovery and reduce complications:

- **Stop smoking** to lower surgical risks and improve healing.

- **Maintain a healthy weight** to decrease postoperative complications.
- **Engage in regular exercise** to strengthen muscles and enhance recovery.
- Reduce infection risk by:
  - Avoiding **shaving or waxing** the surgical area for one week before surgery.
  - **Bathing or showering** the day before or on the day of surgery.
  - Keeping **warm** before surgery and informing the team if you feel cold.
  - **Managing diabetes** and maintaining stable blood sugar levels.

Speak with your healthcare team about necessary vaccinations to protect against infections during recovery.

## Possible Complications

The healthcare team takes precautions to minimize risks, but complications can still occur.

### *General Surgical Risks*

- **Bleeding** during or after the procedure, possibly leading to temporary swelling (**hematoma**) that resolves in 1-2 weeks.
- **Scarring** at the incision site (**1 in 60**).
- **Infection** at the surgical site (**1 in 300**), which may require **antibiotics** or, in rare cases, additional treatment.
- **Allergic reactions** to surgical materials, anesthesia, or medication.
- **Chest infection**, with an increased risk for smokers or those with underlying lung conditions.

### *Specific Risks of Ulnar Nerve Release*

- **Persistent numbness** in the ring and little fingers due to **nerve damage** before or during surgery.
- **Recurrent symptoms** from **scar tissue formation** around the nerve (**1 in 8**), which may require another operation.
- **Numbness below the elbow** due to small nerve damage (**1 in 50**) or postoperative scarring (**1 in 20**).
- **Tenderness** at the scar site, which typically improves over time.
- **Complex Regional Pain Syndrome (CRPS)**, a condition causing severe pain, stiffness, and limited hand function. Treatment may include **pain management and physiotherapy**, though symptoms can persist for months or years.

## Postoperative Recovery

### *In Hospital*

- After surgery, you will be monitored in the **recovery area** before being transferred to a **ward**.
- A **bandage** will cover the surgical site, and a **sling** may be used for support.
- Most patients can go home **on the same day**, but some may require a **longer stay** depending on their condition.
- If you have any concerns, consult the **healthcare team** immediately.

### *Returning to Normal Activities*

If you had sedation or general anesthesia:

- Arrange for a **responsible adult** to drive you home and stay with you for **24 hours**.
- Avoid **driving, operating machinery, or cooking** for at least **24 hours**.
- Do not **consume alcohol** or **sign legal documents** during this time.

## *Wound Care and Rehabilitation*

- Keep the **wound dry** for **4 to 5 days**, using a **waterproof dressing** when showering.
- Your healthcare team will advise you on **stitch removal** or **dressing changes**.
- **Gentle exercises** for your **fingers, elbow, and shoulder** can prevent stiffness.
- A **slings** may be required for a few days to provide support.

## *Resuming Daily Activities*

- Regular **exercise** will support recovery, but always follow medical advice before starting any routine.
- Do not drive or ride a bike until you have full **control over your hand and arm** in case of an emergency. Always check with **your doctor and insurance provider**.

## **Long-Term Outlook**

For some patients, **symptom relief is immediate**, while for others, **full recovery may take up to 18 months**.

- If **muscle wasting** occurred before surgery, it may not fully recover, but the operation should **prevent further nerve deterioration**.
- Symptoms may continue to **gradually improve** over time.

## **Summary**

Ulnar nerve compression can cause **numbness and weakness** in the hand. If left untreated, it may result in **permanent nerve damage**.

An **ulnar nerve release** can relieve symptoms and **prevent further deterioration**.

**Surgery is generally safe and effective**, but as with any procedure, there are **risks and potential complications**. Understanding these factors will help you make an **informed decision**.

Keep this document for reference and consult your **healthcare team** if you have any concerns.

Risk and complication statistics are based on **global studies**. Your **surgeon or doctor** can provide more details on risks specific to your condition and discuss alternative treatment options.

This document is intended for informational purposes only and should not replace **medical advice** from your healthcare provider.