

Carpal Tunnel surgery

Commissioning decision	The ICB will provide funding for carpal tunnel surgery for patients who meet the criteria defined within this policy.
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Policy Statement:

The ICB will fund surgical treatment of carpal tunnel if one of the following criteria is met:

- a. The symptoms significantly interfere with daily activities and sleep symptoms and have not settled to a manageable level with either one local corticosteroid injection and/or nocturnal splinting for a minimum of 8 weeks;
- Or
- b. There is either (i) a permanent (ever-present) reduction in sensation in the median nerve distribution; or (ii) muscle wasting or weakness or thenar abduction (moving the thumb away from the hand).

Rationale:

Many cases of carpal tunnel syndrome will resolve spontaneously and can be managed conservatively with physiotherapy, wrist splints, NSAIDS and steroid injections. There are recognised criteria whether surgical release may be beneficial.

Plain English Summary:

Carpal tunnel syndrome (CTS) is a relatively common condition that causes a tingling sensation, numbness and sometimes pain in the hand and fingers. Usually, these sensations develop gradually and start off being worse during the night. They tend to affect the thumb, index finger and middle finger.

In some cases CTS will disappear without treatment, or simple self-care measures will reduce the symptoms. Non-surgical treatments, such as wrist splints and corticosteroid injections, are used to treat mild or moderate symptoms. Surgery may be required if non-surgical treatments fails to relieve the symptoms. It may also be used is there is a risk of permanent nerve damage.

If your doctor believes that you meet the criteria set out in this policy, then the ICB will fund the treatment.

Evidence base:

Carpal tunnel syndrome (CTS): a look at the evidence for treatments

<http://www.evidentlycochrane.net/carpal-tunnel-syndrome/>

Verdugal R et al (20drome', 2008 08), 'Surgical versus Non Surgical treatment for Carpal Tunnel Syndrome', 2008, Cochrane Neuromuscular Disease Group Cochrane Library.

Policy Category:

CBA

Who usually applies for funding?

Not Applicable



Marshall SC, Tardif G, Ashworth NL. ‘Local corticosteroid injection for carpal tunnel syndrome’. *Cochrane Database of Systematic Reviews* 2007, Issue 2. Art. No.: CD001554. DOI: 10.1002/14651858.CD001554.pub2.

Similarity to other local ICB policies – Bristol, North Somerset and South Gloucestershire, Redditch and Bromsgrove, Worcestershire and South Worcestershire.

For further information please contact GLICB.IFR@nhs.net

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Policy review date	June 2024

Policy sign off

Reviewing Body	Date of review
Effective Clinical Commissioning Policy Group	3 rd August 2015
Integrated Governance and Quality Committee	20 th August 2015

Version Control:

Version No	Type of Change	Date	Description of Change
1		12.10.2015	
2	Review date	15.03.2018	Policy review date now March 2021
3	Minor word and date change	10.06.2021	Minor word changes to reflect EBI policy, review date changed to June 2024. Minor changes ratified by MW & MA-E June 2021.