

Cubital Tunnel Syndrome and Ulnar Tunnel Syndrome

Information for patients

Aim of this leaflet

The Ulnar Nerve provides sensation to the ring and little fingers and power to the small muscles within the hand. This leaflet provides information to patients on Cubital Tunnel Syndrome (elbow) and Ulna Tunnel Syndrome (wrist), the causes and exercises to aid treatment.

What is Cubital Tunnel Syndrome?

Cubital Tunnel Syndrome (CubTS) occurs when there is irritation or pressure along the Ulna Nerve at the inside of the elbow.

What is Ulnar Tunnel (Guyons's Canal) Syndrome?

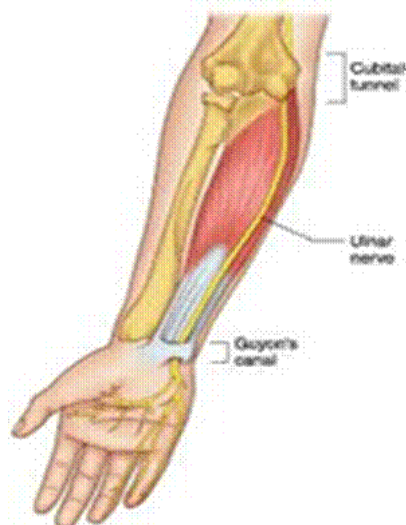
Ulnar Tunnel Syndrome (UTS) occurs when there is irritation or pressure on the nerve at the little finger side of the wrist.

People with Cubital and Ulnar Tunnel Syndromes often complain of:

- tingling, pins and needles and numbness in the ring and little fingers.
- pain and aching along the inside of the forearm.
- weak grip and pinch and reduced coordination during activities such as writing and typing.

Risk factors

Ulnar Nerve problems at the wrist and elbow are often related to overuse involving repetitive tasks, prolonged periods in a fixed position, trauma such as a wrist and elbow fractures, or arthritic changes in the wrist and elbow.



Treatment principles

Activity modification

Discuss with your therapist the general tasks you carry out in your day. Your therapist can advise ways to try and keep your wrists and elbows in the best position to reduce pressure on the Ulnar Nerve.

As a general rule:

1. Avoid prolonged periods with the elbow in a bent position:
 - use a folded towel wrapped around the elbow at night.
 - wear a headset for using the telephone.
 - use voice-activated software for computer work.
 - use an appropriate keyboard and appropriately located keyboard for typing work.
2. Avoid leaning on the elbow, or putting pressure on the inside of the arm:
 - when using the computer, avoid resting elbows on an arm rest.
3. Keep wrist(s) in a neutral position and avoid pressure on the base of the palm at the little finger side:
 - use a splint for sleeping to keep your wrist in neutral.
 - avoid positions such as press-ups or downward dog in yoga.
 - ensure your bike is adjusted for your posture and grip pattern.

4. Avoid gripping and forceful twisting:
 - whenever possible use your whole hand and all fingers, rather than leaving some fingers out of tasks. Alternatively use a gadget/aid to help you.
5. Avoid repetitive movements or holding an object in the same way for a long time:
 - Use your phone in a handsfree manner (with headphones or on speaker).
 - Take breaks when writing, knitting, or using tools.
6. Take short regular breaks, alternating between easy (effortless) and hard (effortful) tasks. Switch hands regularly during activity.
7. Use as little effort as possible by reducing the speed and force used when performing tasks.

Splinting and supports

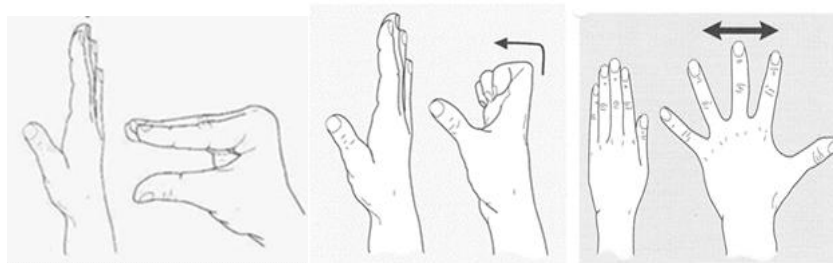
The aim of supports is to reduce pressure on the Ulna Nerve by preventing positions and movements that will worsen your symptoms. The splints and supports needed will depend on the severity of your symptoms and whether the problem is at the wrist, elbow, or both. You might be issued with a splint for the wrist and elbow or advised to use a rolled-up towel to stop your elbow bending at night. If your little and ring fingers are moving abnormally, you may be provided with a splint to use during activity.

Exercises

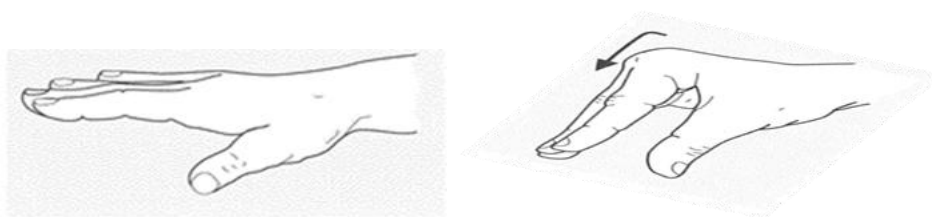
If your Ulnar Nerve is irritated at the elbow, complete the exercises in mid-prone to avoid resting on the elbow.



Tendon gliding and intrinsic muscle exercises:



Complete in a sequence slowly:
X 5 repetitions
X 3-5 times daily



Palm flat to intrinsic
X 5 repetitions
X 2 times daily or alternate days

If any exercises exacerbate your symptoms, check you are doing them correctly, take a rest break and try again the next day.

It may take 8 to 12 weeks for your symptoms to improve.

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