**CARPAL TUNNEL SYNDROME (CTS)**

Physiotherapy Can Prevent Surgery in Mild to Moderate Severity CTS

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**PHYSIOTHERAPY CONSISTING OF:**

- Custom Thermoplastic Splinting
- Carpal Tunnel Decompression Exercise Program (upper limb nerve and tendon gliding exercises shown in vivo to reduced carpal tunnel pressure - Seradge et al.)

**AT 18 MONTHS POST-TREATMENT SHOWED RESOLUTION OF SYMPTOMS IN:**

- **80%** of those with Mild CTS
- **71%** of those with Moderate CTS

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**CANDIDATES FOR PHYSIOTHERAPY MANAGEMENT**

Those with mild to moderate CTS. This is primarily defined by three criteria:

- **Duration of symptoms**
  - < 12 months

- **Severity Score for nocturnal paraesthesia of**
  - < 6/10

- **No thenar muscle atrophy**

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(Outcome Measures - Symptom Severity Scale (SSS) and the Functional Status Scale (FSS)


ELIGIBLE PATIENTS

We accept all categories of patients including:

- Medicare EPC (Bulk Billed at Kwinana, Bulk Billed on request at Aubin Grove)
- Workers Compensation, ICWA (Bulk Billed)
- Department of Veterans Affairs (Bulk Billed)
- NDIS (Bulk Billed once approved by NDIS - we arrange this)
- Private Patients - Fees Apply, Private Health Fund rebates on-site

SUMMARY

On average, 3 out of 4 patients with Mild to Moderate CTS may be able to avoid surgery with low-cost physiotherapy interventions including customised wrist splinting and a physiotherapist guided home exercise program. A 6-8 week trial of conservative management appears to be indicated from both cost and patient outcome perspectives.

A NOTE ON SEVERE CASES OF CTS

Patients with severe cases of CTS are unlikely to do well with conservative management alone. Evidence suggests surgical referral should be considered for these patients. Gerritsen et al.

BOOK NOW

CLICK HERE TO BOOK YOUR APPOINTMENT