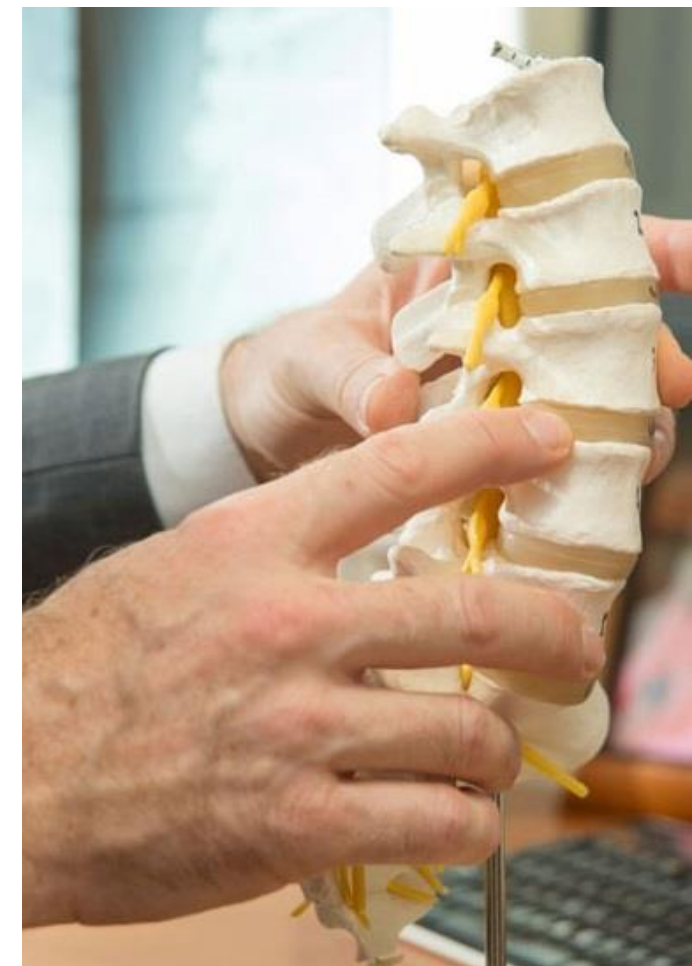


Tingling or numbness of the hand

Diagnostic dilemmas explained

WEBINAR FOR GPs - 9 FEBRUARY 2022
8.00 AM – 8.30 AM



Dr Ralph Stanford

ORTHOPAEDIC SPINE SURGEON



- Spinal surgeon with over 20 years' experience.
- Dedicated to lifelong learning and sharing my expertise with others, I attend spinal conferences worldwide and regularly consult with colleagues about successful treatments.
- Conjoint Senior Lecturer at the University of New South Wales; Supervisor of Training for Orthopaedic Trainees, Prince of Wales Hospital; and Education Secretary for the Spine Society of Australia.
- Honorary Senior Scientist at Neuroscience Research Australia (NeuRA).

If you have any questions about a patient, please feel free to call me on 02 9650 4893.

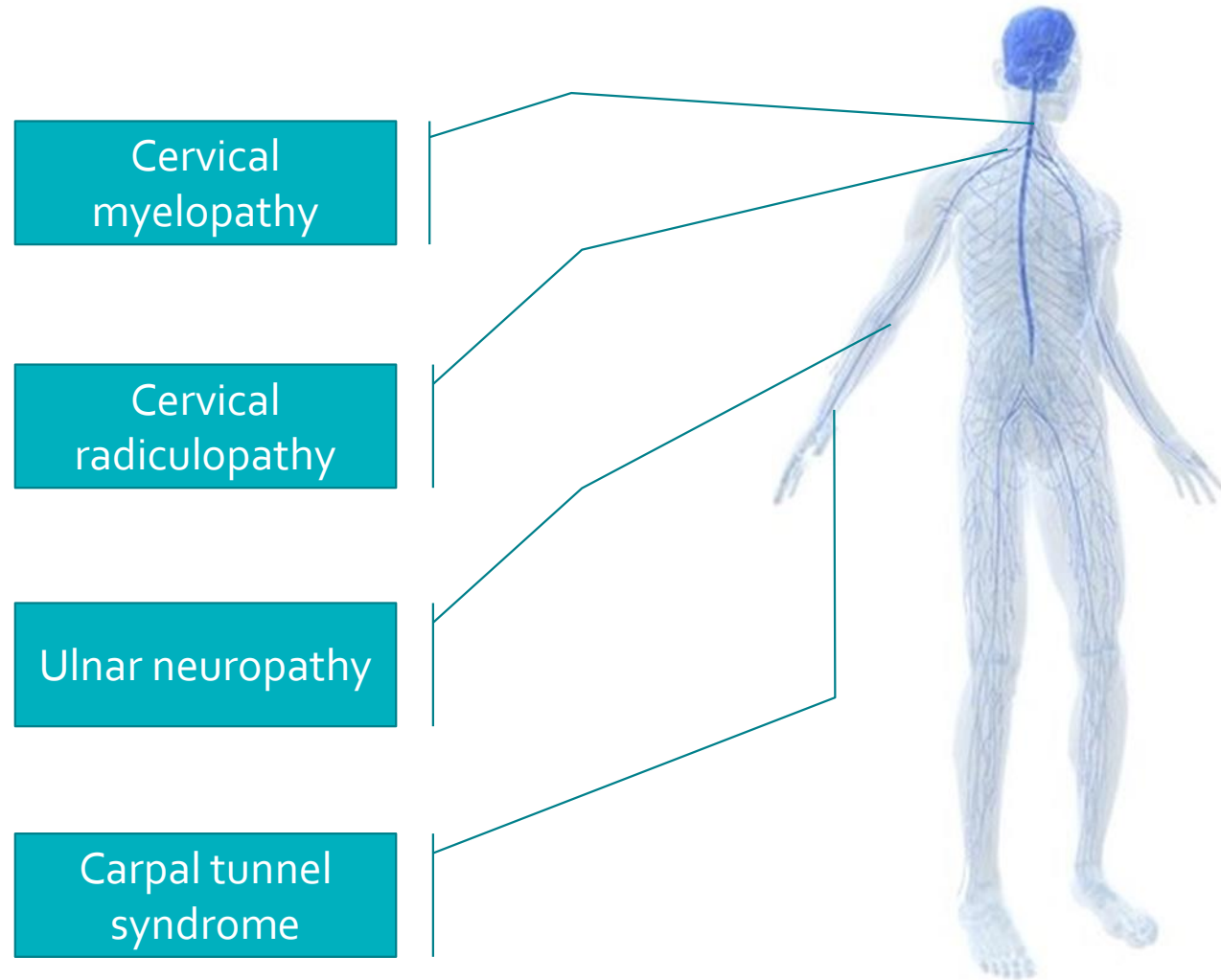
I will return your call and discuss how we can help.

Introduction

- Numb hand or hands
- Fairly common
- Number of possibilities
- We will look at where symptoms cross over



Differential diagnosis



What do patients say?

- My hand goes numb
- All over
- Goes all the way up my arm

- Find it difficult to characterise more precisely



What should we ask?

- Distribution
- Weakness
- Nocturnal symptoms
- Triggers
- Relievers



Distribution

Median nerve or C6 nerve root



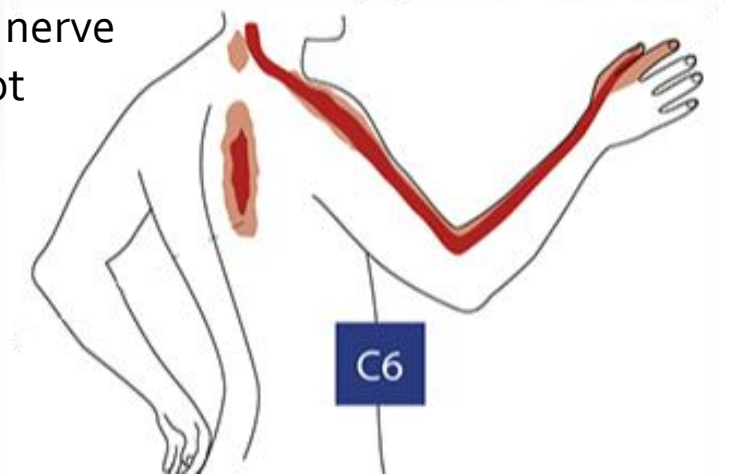
Ulnar nerve or C8 nerve root

Distinction between nerve root and peripheral nerve not always clear

Pain behind
the shoulder
=
nerve root



C6 nerve
root



Carpal tunnel
syndrome



Weakness

Grip



Ulnar nerve (or C8)

More proximal – shoulder, elbow, wrist

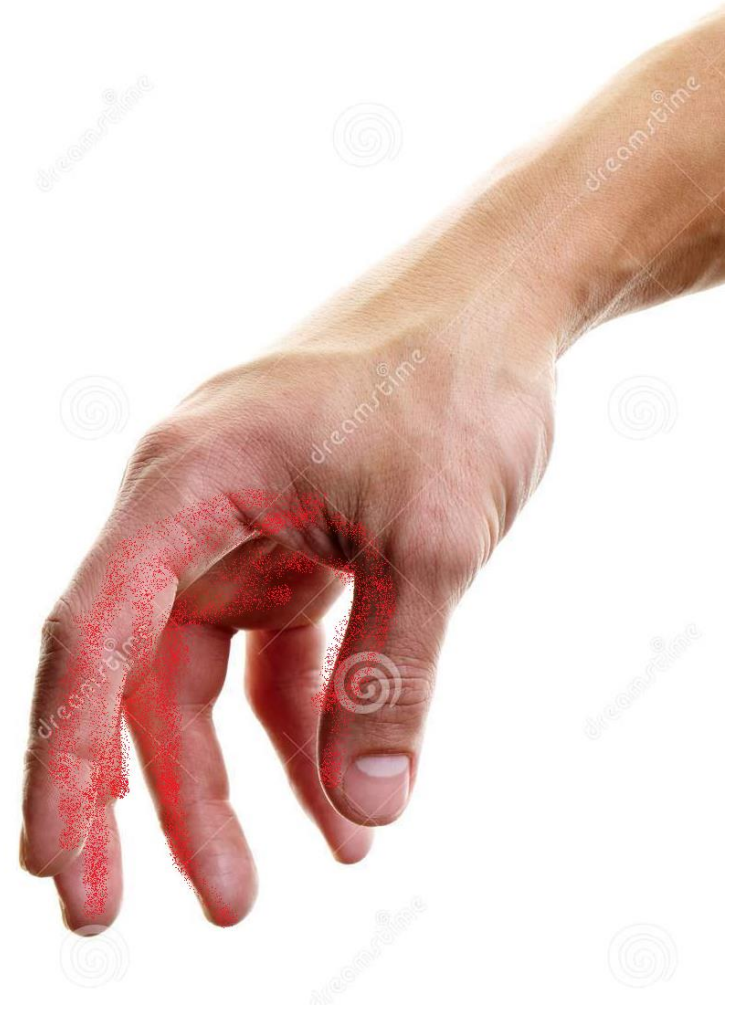


Nerve root

Nocturnal

- Carpal tunnel syndrome
- 'Wake and shake'

Less commonly ulnar neuropathy and nerve root



Triggers



Carpal tunnel syndrome



Ulnar neuropathy at elbow
= 'cubital tunnel syndrome'

Triggers



Pain turning head
Nerve root

Relievers



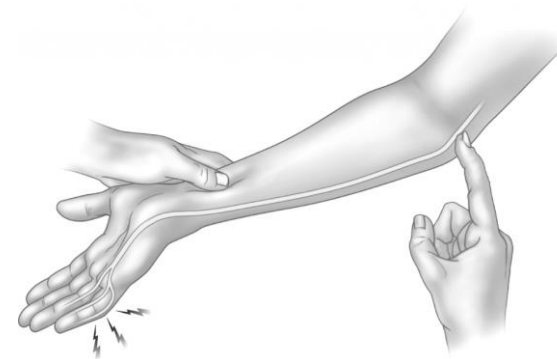
Arm over head for nerve root

Shake hand for carpal tunnel



Examination

- Weakness proximal think of nerve root
- Mapping out sensory changes
 - May help with median vs ulnar nerve
 - But can be confusing regards nerve root
- Tinel's sign at cubital tunnel for ulnar nerve
- Carpal tunnel compression for median nerve



Cervical myelopathy

- Numbness diffusely both hands
- No pain
- No triggers/relievers
- May have clumsy hands, unsteady gait
- May have general mild weakness

Investigations

- NCS/EMG if symptoms for more than 6 weeks and diagnosis not clear
- MRI cervical spine if suspect nerve root or myelopathy

Summary

Median/ulnar nerve

- Nocturnal wake and shake
- Worse with functional positions
- Symptoms and signs localised to hand
- Positive nerve compression tests

Cervical nerve root

- Pain starts back of shoulder
- Symptoms referred to specific fingers
- Aggravated by turning head
- More proximal weakness

Q & A

As always if you have any questions about a patient, please feel free to call me on [02 9650 4893](tel:0296504893). I will return your call and discuss how we can help.

You can also reach me via ralphstanford@powspine.com.au.

- A **recording** of the webinar will be available on my website

- **Further resources for GPs** are available at <https://spinalsurgeonsydney.com.au/for-referrers>

- **To receive future resources via email** send your name email address to info@powspine.com.au

