Getting a Grip on Carpal Tunnel Syndrome

Carpal tunnel syndrome is a condition in which there is pressure on the median nerve—the nerve in the wrist that supplies feeling and movement to parts of the hand. If you play your instrument for many hours per day without adequate breaks and/or stretching, you may one day find yourself afflicted with carpal tunnel syndrome. In his book, *The Bassist’s Guide to Injury Management, Prevention, and Better Health*, Chicago-based chiropractor, Randall Kertz, D.C., discusses the condition in depth and sheds some light on the symptoms, treatments, and preventive measures. Though he’s a bass player himself, and his title suggests that it might be specific to that instrument, Kertz designed the guide to point out problems that any musician may encounter.

What causes carpal tunnel syndrome?

Overuse causes repetitive strain injuries. It makes that area swell from inflammation because of the extra work. The result is pain and numbness. There’s a ligament at the wrist crease called the transverse carpal ligament, and when that gets tight, it presses down on the nerve and you get this issue. Carpal tunnel syndrome is also very over-diagnosed. Physicians and therapists tend to say that anything coming from the wrist is carpal tunnel and that’s not the case. True carpal tunnel syndrome will go to the thumb, the index finger, the middle finger, and sometimes half of the ring finger. You’ll feel numbness or tingling in those areas. It will also wake you up at night due to the swelling from the fluid that accumulates there when you’re resting. If it doesn’t wake you up at night, it doesn’t go to those areas, and it goes to the pinky, it’s something else entirely.

What are some of the treatments?

There are few effective treatments. One of them is what I do as a chiropractor. There’s an adjustment called “the opponent’s role” utilizing a
toggle board device. I take the wrist and stretch out the affected area by lifting the ligament up off the wrist and then, with a high velocity thrust, I am able to secure the adjustment. What that does is stretch the musculature out and it gets the bones moving properly again. The carpal bones in the wrist tighten up because the attached muscles are tightening from repetitive motion. Carpal tunnel syndrome makes those bones, which should articulate individually, not move independently. The adjustment helps restore the proper motion. That works most of the time. There’s also ultrasound, which is a physical therapy treatment. It penetrates down below the surface of the skin and reduces inflammation. Acupuncture is also very effective.

What are some preventive measures?

If you’re practicing your instrument eight hours a day without breaks, or just starting to play, you’re likely to get these problems. Keeping the wrist in a neutral position, as much as possible, will reduce the risk of contracting carpal tunnel. I’m a bass player, so I play with my fingers. If you look at it in the context of that instrument, my left hand is constantly in a flexed position so that I can grab the notes on the neck. My right hand is also in a state of flexion because I play with my fingers. What happens is players tend to get their hands on the instrument, cock them over into that flexion, and just let them sit there. By keeping it there, the force doesn’t let up; there’s no rest. So you have the flexion component causing a problem.

Being aware of this and resting your hand when possible will reduce the risk. You’re not going to be able to rest all the time, you have to play the instrument—I get that. You can also reduce the angle at which you’re playing, or maybe in between songs or takes, you can put the wrist into the neutral position. This is going to prevent you from getting carpal tunnel or similar symptoms. Taking a break once in a while, shaking the wrist out, and stretching will help immeasurably. It’s really about awareness, which nobody talks about. When you go to music school, whether kindergarten or university, nobody tells you: “Do these stretches or keep your wrist in this motion.” In fact, it’s quite the opposite. There’s a mentality that, “I practice 10 hours a day, now you have to too.” That may be the case, but there’s a better way to do it.

For more on carpal tunnel syndrome and Dr. Kertz’s The Bassist’s Guide to Injury Management, Prevention and Better Health visit drkertz.com.