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What is Ulnar Nerve Compression?

Ulnar nerve compression is caused by pressure against the ulnar nerve, most commonly at the elbow. Common symptoms include pain and numbness in the hand, usually in the ring and little finger. Many conditions, including diabetes, put people at risk for ulnar nerve compression at the elbow. The problem is diagnosed by history, an examination and nerve testing.

Who Should have Ulnar Nerve Surgery?

Patients who have significant symptoms of numbness, dropping items, and weakness, and who fail to improve with anti-inflammatory medicines, braces, therapy, and other treatments, may benefit from ulnar nerve decompression.

What Happens During the Surgery?

An incision, or cut, is made above the elbow, and the nerve is located in a bony groove. Pressure by the surrounding tissues is removed, and the nerve may sometimes be shifted to a slightly different position (nerve transposition). The incision is closed, usually with buried stitches, and a large bandage applied. A sling is helpful for the first week.

What are the Risks of the Surgery?

There is a small risk of infection or nerve damage. Rarely, chronic pain in the arm known as chronic regional pain syndrome may develop after surgery or trauma on a limb.

What is Recovery Like?

After surgery, patients go home the same day, and should elevate the arm for 48 hours. A sling may be helpful for the first week or so. The dressing can be changed after three days. Most patients can return to work in 2-4 weeks. The pain from the incision can be controlled with medicines such as ibuprofen or Tylenol. A small amount of stronger pain medicine may be needed by some patients for a few days.

If you have any questions or concerns after the surgery, please contact our office at 401-606-6360. If you feel it is an emergency, call 911 or go to the nearest Emergency Department.



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