

Orthopaedic Observations

A Matter of Medicine...

TM Pending

Is Hand Pain Common Because of My Diabetes?

By Richard A. Bernstein, Orthopedic Hand Surgeon



The effect of diabetes goes beyond problems with blood sugar: diabetes may also be affecting your hands. There are four hand problems that occur in patients with diabetes, many of which can be easily addressed and treated.

Carpal tunnel syndrome is not only a problem in assembly workers or people who spend their days on computers. Diabetes also puts you at risk for developing this problem. Carpal tunnel syndrome involves pressure on one of the three major nerves coming down to the arm, specifically to the thumb, index, and long fingers. Numbness and tingling are common symptoms as well as pain that oftentimes awakens people from sleep. Many people develop symptoms while driving a car or reading a book or newspaper. Sometimes it is simply numbness, other times pain can develop with an aching sensation. People will commonly try to shake their hands to restore sensation. Splints and therapy can help diminish the symptoms of carpal tunnel compression and despite what people hear, surgery is often not needed for this condition.

There have been some reports of good success with the so-called cold laser. This ultrasound-like wand has been used in Europe and one study was done at a large car assembly plant showing that it can help diminish the pain and discomfort of carpal tunnel.

Second, pain, clicking and the sense of locking of one's finger is medically known as a trigger finger. This condition is also more common in patients with diabetes and sometimes will cause a painful locking of the finger, especially when getting up in the morning.

Rather than locking, some people develop a less severe example of trigger finger pain. Tendonitis, is an inflammation of the tendons. It usually affects the tendons which allow us to bend our fingers. Similar to carpal tunnel syndrome, splints, medication, therapy, and sometimes a Cortisone injection can eliminate this. Ninety percent of patients with a trigger finger can be cured without surgery.

A third condition that can get confused with a trigger finger is a process called Dupuytren's contracture, which is a benign non-cancerous condition, initially described by a French surgeon. It begins with thickening of the skin in the palm, usually along the ring finger. When it progresses, the finger bends down and it cannot be straightened out. Unlike a trigger finger where there is pain with motion, and the finger can be straightened with pressure, Dupuytren's involves a pain-free nodule where the skin actually contracts and shortens. The two conditions can sometimes be confusing: Dupuytren's will commonly run in families and is more common in people whose ancestors come from Northern Europe. Men are more commonly affected than women.

Lastly, one of the unfortunate side effects of diabetes is a peripheral neuropathy. Symptoms include tingling in all fingers which is different from the distribution in carpal tunnel syndrome. A doctor can help differentiate a peripheral neuropathy from symptoms of carpal tunnel syndrome. The former will often involve both hands and both feet, in a distribution starting from the ends of the toes or fingers coming more towards the central part of the body. If you are developing progressive numbness or tingling or pain in your fingers, let your doctor know, for these conditions, are treatable and can help your hand function. Though diabetes is a difficult condition, many of the consequences of the disease, especially those involving the hands can be treated and most cured.

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He is a member of the American Society for Surgery of the Hand, New England Hand Society, New England Hand Study Group, American Academy of Orthopaedic Surgery, American Medical Association, New Haven County Medical Society, and the Connecticut State Medical Society. He has been a Visiting Lecturer for the American/Japanese Hand Society, Maine Orthopaedic Society, Yale University School of Medicine and the Dartmouth School of Medicine.

His special area of interests are Rheumatoid Arthritis, Fractures of the Wrist and Hand, and Carpal Tunnel Syndrome. Dr. Bernstein grew up locally in Orange and spent time volunteering at Yale New Haven Hospital during the summers. After graduating from Hopkins Grammar School, he continued college and medical school in Connecticut. Since returning from his fellowship at Harvard he has developed a specialty Orthopaedic practice in Hand and Upper Extremity Surgery.

Dr. Bernstein is actively involved with the American Society for Surgery of the Hand and has been asked by its Presidents to serve on multiple task forces, the Residents and Fellows Conference and Scientific Exhibits Committees. Besides his active clinical practice, he teaches at the Yale Medical School for Medical and Physician Associate Students as well as the Resident Doctors training in Orthopaedic Surgery.