

Cubital Tunnel Release

What is the cubital tunnel?

The ulnar nerve goes around the back of the inner side of your elbow (sometimes called your funny bone). It then goes through a tight tunnel between the forearm muscles. The nerve can be stretched when the elbow is flexed (bent) and sometimes there can be pressure on the nerve, - either of these can result in numbness in your ring and little fingers. This is called cubital tunnel syndrome. If your symptoms are mild and occur during the night, your consultant may recommend using a splint to keep your elbow straight while you sleep.

If the splints are not helpful, your consultant may recommend surgical release of the nerve around the back of your elbow - cubital tunnel release.

What happens during cubital tunnel release?

Cubital tunnel release usually takes 30 – 45 minutes and it can be carried out under general or local anaesthetic. Be sure and discuss what method will be used with your anaesthetist.

Your surgeon will make a cut over the inner side of your elbow and then release any tight tissue that might be compressing the nerve. Occasionally a piece of bone needs to be removed or the whole nerve needs to be re-routed around the front of your elbow to avoid pressure on the nerve. Your surgeon will then close your skin with stitches or clips.

Right after your operation you will be taken to a recovery area. You will have a dressing on your wound and may need to wear a sling.

Cubital tunnel release is usually performed as a day case operation, which means that you will be able to go home the same day.

Going home after cubital tunnel release

You will not be able to drive immediately after the operation, so please arrange for someone to take you home when you are discharged.

You will need to do some gentle exercises to prevent your fingers, elbow and shoulder from becoming stiff:

Fingers: Make a fist, then straighten your fingers.



Wrist: Bend your wrist forwards, backwards and side to side.



Shoulder: Keeping your arm in the sling, lift your arm up above your head.

Shrug your shoulders up towards your ears.

DO NOT bend your elbow more than a right angle and it is best to keep it in the sling until you see the hand therapist about a week after your operation. If you are worried that your elbow may bend more than a right angle, you could wrap a towel around your elbow, and hold it in place with elastic bands or tape.

You should plan to rest as much as possible for at least the first few days after surgery. You can use your hand for light activities, such as holding a fork or toothbrush, but you will need to keep it in the sling and not bend your elbow more than 90- degrees. Take plenty of the pain relief medication you have been prescribed.

Keep your wound clean and dry until any stitches or clips are removed. You could secure a plastic bag over your arm wound with elastic bands or cling film for showering.

You may be off work for 3-4 weeks and up to 6 weeks if you have a heavy manual job. You will be able to discuss the details of this with the hand therapist or consultant.

Many patients notice an improvement to the tingling and numbness affecting their fingers soon after cubital tunnel release. However, in some cases recovery can take up to 18 months due to damage caused by pressure on the ulnar nerve.

As with any surgical procedure there may be complications which include:

- Pain
- Bleeding
- Thick or lumpy scarring
- Infection
- Sensory loss around the surgical scar
- Elbow stiffness
- Continued numbness or tingling in your hand
- Rarely - permanent damage to the ulnar nerve

If you experience any of the previous complications, please contact:

Plastics Rehabilitation Team: contact us on 01392 402429 or if you have any problems over the weekend or after 5pm Monday – Friday, contact Otter ward on 01392 402807.

The Trust cannot accept any responsibility for the accuracy of the information given if the leaflet is not used by RD&E staff undertaking procedures at the RD&E hospitals.

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