

Patient Education Cubital Tunnel Injections

Explanation of Condition

The cubital tunnel is a channel which allows the *ulnar nerve* to travel over the elbow. It is bordered by the medial epicondyle of the humerus (arm bone), the olecranon process of the ulna (forearm bone on pinkie side) and the tendinous arch joining the humeral and ulnar heads of the flexor carpi ulnaris. The ulnar nerve is very exposed at this juncture and here is where most common nerve entrapments occur. If you've ever experienced an electric shock when hitting the inside of your elbow (most people know this as the" funny bone"), you are hitting your ulnar nerve.



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Compression of the nerve may lead to a tingling or 'pins and needles' sensation along the 4th and 5th fingers of the hand. While most cases are minor and resolve by themselves over time, chronic compression or repetitive trauma may cause more persistent problems (called cubital tunnel syndrome).

The most common causes are:

- Sleeping with the arm folded behind neck, elbows bent.
- Pressing the elbows upon the arms of a chair while typing.
- Resting or bracing the elbow on the arm rest of a vehicle.
- Bench pressing.
- Intense exercising and strain involving the elbow.

Symptoms of cubital tunnel syndrome can include:

- Vague elbow and forearm pain
- Partial or even full numbness in the ring and small fingers
- Clumsiness of the hand and difficulty with grip
- More noticeable symptoms at night or while driving

What is a cubital tunnel injection?

The area is cleaned with a disinfectant. The nerve can be approached 2-3 inches above the elbow joint on the inside of the elbow. A small needle containing an anesthetic (numbing agent such as Lidocaine) and a steroid (dexamethasone or Kenelog) is used to inject the medication into the nerve area.

Who should not get the injection?

Anyone with:

- Active infection over the area
- Adverse reaction to steroid
- Uncontrolled diabetes mellitus
- Suppressed immune system
- Adverse reaction to local anesthetic



What to Expect with Treatment

How soon will it help?

It varies from patient to patient, but injection can provide relief immediately, or it could take a few days.

Possible Side Effects of Treatment, and Instructions

- Bleeding
- Pain
- Abnormal sensation in arm, such as tingling, tickling, numbness, or burning
- Elevated blood glucose levels (without apparent clinical risk)
- Rare side effects may include infection, nerve or ligament injury
- Flare-up reaction (temporary worsening of symptoms)

Special considerations:

Please let your doctor know if you're on a blood thinning medication, if you have any active infection, or if your diabetes is poorly controlled. In these cases, the procedure may be postponed.

If you have diabetes, you should monitor your blood sugar closely after the procedure as the steroid may cause them to increase. If they continue to be elevated, contact your primary care physician.

Questions

The CORE Institute is dedicated to your outcome. If any questions or concerns arise, please call The CORE Institute at 1.866.974.2673.