Resistence to Intensive Tx Key

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Diabetic Patients Can Benefit from Carpal Tunnel Surgery

BY NEIL OSTERWEIL

Diabetic nephropathy should not be a barrier to carpal tunnel release surgery, because diabetic patients with carpal tunnel syndrome experience the same degree of neurophysiologic recovery after the procedure as their nondiabetic counterparts, according to Swedish investigators.

In a prospective case-control study, there were virtually no significant differences in neurophysiologic recovery after carpal tunnel syndrome (CTS) release between diabetic patients and controls, or among diabetic patients with or without peripheral neuropathy.

“We therefore recommend that diabetic patients with CTS are offered the same options for surgical carpal tunnel release as nondiabetic patients,” wrote Dr. Niels O.B. Thomsen of Malmö (Sweden) University Hospital and his colleagues.

The authors looked at pre- and postoperative data on 35 consecutive diabetic patients and 31 age- and sex-matched nondiabetic controls treated for CTS during 2004-2007. All cases and controls also had nerve conduction studies 1 year after surgery.

Diabetic patients were diagnosed with peripheral neuropathy if they had abnormal preoperative neurophysiologic values in sural nerve sensory conduction velocity (SCV), sensory nerve action potential (SNAP), and peroneal nerve motor conduction velocity studies.

At 1-year follow-up, there were significant differences in nerve conduction recovery parameters compared to nondiabetic patients, with CTS, they obtain the same degree of neurophysiologic recovery after surgical carpal tunnel release. This result even applies to diabetic patients with evidence of peripheral neuropathy, the researchers wrote.

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