

William's story

I was working in a job which involved a great deal of typing when the pain started in my right wrist hand and lower arm (October 2008) but I didn't think anything of it at first as I had previously had a similar episode under similar condition which had gradually resolved itself when I stopped doing large amounts of typing. This time, however, the pain increased and so I arranged to see my local doctor. The diagnosis at this point was that the problem was likely to be Carpal Tunnel Syndrome and I was signed off and given a course of painkillers, working up to Diclofenac Sodium.

There was no remission this time, however, and the pain got so bad that anything touching my arm was absolute agony so I was referred to the Hand Clinic. They referred me to the Neurology Department where I underwent a nerve conductivity test which showed no significant sign of Carpal Tunnel Syndrome. I was returned to the Neurology Department where I was seen by a doctor who finally got diagnosed (about March 2009) as suffering from Complex Regional Pain Syndrome

My doctor started me on a course of different medication and within days there was an enormous improvement in the level of pain. However, since I had now been unable to use that hand to any noticeable extent for a good six months there was considerable muscle wastage in my forearm so I was also put on a course of physiotherapy to strengthen the arm and try to get back to work.

As it currently stands (November 2009), I am nearly better and at the point of returning to work soon. The thing that has really taken the time is building up the strength and muscles in my arm so they are fit for work.

A number of things stand out from this account. Firstly, this is an area of medicine which is apparently not widely understood and this led to a considerable delay in my being referred to the one doctor who was able to treat me effectively. I want to state quite clearly, by the way, that I am not blaming the doctors for this lack of specific knowledge and my own GP was eager to follow up my case and learn from it when I visited him over the period of my recovery for routine renewal of my prescription.

Secondly, because of the delay in reaching a correct diagnosis, I underwent a prolonged period of acute pain which I would rather not have had to suffer.

Finally, because of the extended timescale the collateral damage in term of muscle wastage meant that I had to go through a protracted period of recovery which would not have been necessary had I been treated by a doctor who had knowledge of this particular type of incapacity.