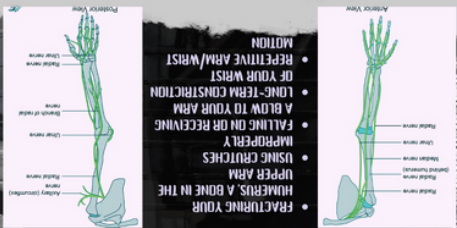


WHICH SPIRALS AROUND THE HUMERUS, ENTRAPMENT OF THE RADIAL NERVE, NEUROPATHY IS PRODUCED BY FINGERS, POSTURE-INDUCED RADIAL MOVEMENT & SENSATION OF THE WRIST & OF WRISTS & HELPS WITH THE NERVE CONTROLS THE BACKWARD BEND THE BACK OF THE UPPER ARM, THIS MOVEMENT OF THE TRICEPS MUSCLE AT DOWN THE ARM & CONTROLS THE THE RADIAL NERVE, WHICH TRAVELS WRIST DROP IS CAUSED BY DAMAGE TO

RADIAL NERVE PALSYP

'SATURDAY NIGHT PALSYP', 'SLEEP PARALYSIS' OR 'HONEYMOON PALSYP' RECEIVES ITS NAME FROM EPISODES OF UNINTENTIONAL PROLONGED RADIAL NERVE COMPRESSION, BECAUSE OF SLEEPING AFTER ALCOHOL, DRUG INTOXICATION, OR CUDDLING. WITH THE INCREASE OF BENZOS AND BRAND WE ARE SEEING MORE AND MORE WRIST DROP.

RADIAL NERVE PALSYP



- COMMONLY SEEN WHEN THE RADIAL NERVE IS ACUTELY COMPRESSED AT THE SPIRAL GROOVE
- SLEEPING WITH THE ARMS HANGING OVER THE ARMREST OF A CHAIR
 - SLEEPING WHILE BENDING THE ARM UNDER THE PILLOW
 - SOMEONE ELSE SLEEPING ON THE ARM
 - LAYING BODY WEIGHT ON THE ARM COMPRESSION FOR LONG PERIODS OF TIME

SOME OTHER CAUSES OF RADIAL NERVE INJURY



- AVOID PUTTING PROLONGED PRESSURE ON YOUR UPPER ARM
- FREQUENT REPOSITIONING DURING SLEEP, IF YOUR FRIEND IS OUT, REPOSITION THEM OFF THEIR ARM
- POSITION ON CHAIRS TO REDUCE RISK OF SLUMPING OVER AND LEANING ON THE ARM OF THE CHAIR
- WHEN CUDDLING AFTER A SHORT TIME REPOSITION TO NOT HAVE ANY PRESSURE ON EITHER ARMS

PREVENTION

INDIVIDUAL CANNOT LIFT IT
WRIST HANGS LIMPLY AND THE
TRICEPS DOWN TO THE FINGERS
WEAKNESS OR INABILITY TO CONTROL MUSCLES FROM THE
PINCING AND GRASPING PROBLEMS
PROBLEMS EXTENDING THE WRIST OR FINGERS
NUMBNESS FROM THE TRICEPS DOWN TO THE FINGERS

SINGS & SYMPTOMS RADIAL NERVE PALSYP



POSTURE - INDUCED
RADIAL
NEUROPATHY
AKA WRIST DROP



RADIAL NERVE PALSYP HEALING

ON AVERAGE CLINICAL IMPROVEMENT IS SEEN IN ABOUT 2-4 WEEKS, HOWEVER IT MAY TAKE UP TO 3 OR 4 MONTHS BEFORE EXTENSION OF THE WRIST & DIGITS RETURN. THE TIME IT TAKES TO HEAL HAS BEEN REPORTED TO HAVE NO RELATION TO NEURAL COMPRESSION TIMES.

RADIAL NERVE PALSYP SPLINTS & BRACES

THE GOAL OF TREATMENT FOR RADIAL NERVE INJURY IS TO RELIEVE SYMPTOMS WHILE MAINTAINING MOVEMENT IN THE WRIST & HAND.

1. **DYNAMIC EXTENSION SPLINT:** KEEPS THE WRIST IN NEUTRAL (SLIGHTLY EXTENDED) & ALLOWS THE FINGERS TO MOVE FREELY. THIS WAY THE AFFECTED EXTREMITY CAN CONTINUE TO BE USED FOR FUNCTIONAL TASKS SUCH AS GRASP & RELEASE. BEST CHOICE FOR HEALING.
2. **WRIST COCKUP:** WILL STILL BE ABLE TO MAINTAIN A TENODESIS GRASP. MORE AVAILABLE AND EASIER TO MAKE YOURSELF.
3. **RADIAL NERVE SPLINT:** YOU WOULD THINK THIS WOULD BE THE BEST OPTION, BUT IT ACTUALLY INHIBITS FUNCTION.
4. **RESTING HAND SPLINT:** ONLY RECOMMEND THIS SPLINT IF YOU'RE TRYING TO MINIMIZE JOINT CONTRACTURES FROM EXTREME FLEXION. THIS SPLINT SHOULD BE REMOVED FREQUENTLY FOR SKIN CHECKS & PASSIVE RANGE OF MOTION.

RADIAL NERVE PALSYP TREATMENT

DEPENDING ON THE UNDERLYING CAUSE & EXTENT OF INJURY TREATMENT CAN RANGE FROM:

- ANALGESIC OR ANTI-INFLAMMATORY MEDICATIONS
- ANTISEIZURE MEDICATIONS OR TRICYCLIC ANTIDEPRESSANTS (PRESCRIBED TO TREAT PAIN)
- STEROID INJECTIONS
- ANESTHETIC CREAMS OR PATCHES
- BRACES OR SPLINTS
- PHYSICAL THERAPY TO HELP BUILD & MAINTAIN MUSCLE STRENGTH
- MASSAGE & ACUPUNCTURE
- TRANSCUTANEOUS ELECTRICAL NERVE STIMULATION (TENS)
- OR SURGERY