A chestnut frier with burn wounds on his fingers

Fig. 1

A 37-year-old patient presented with severe but painless burn wounds on three fingers. These wounds were the consequence of his profession as a chestnut frier, where he had to handle hot chestnuts. For several weeks he had complained about paresthesias in his hands, but had been able to touch hot chestnuts without any pain sensation. Neuropathy was confined to the hands and carpal tunnel syndrome was suspected. Final diagnosis was confirmed by nerve conduction tests. After surgical decompression of the median nerve the patients regained his sensory ability in his hand after several weeks of recovery.

The painless burn wounds as a consequence of neuropathy in this patient were the presenting symptom of a carpal tunnel syndrome, which is the most common upper limb compression neuropathy and accounts for approximately 90% of all entrapment neuropathies [1]. Several tests have been described for the diagnosis of carpal tunnel syndrome. Most of the tests are complementary to each other, and a combination of symptoms, signs and diagnostic tests should be employed when the diagnosis of carpal tunnel syndrome is made. The gold standard tests however are nerve conduction studies [2]. Surgery is the only effective therapeutic modality in moderate to severe cases [3].

So the carpal tunnel syndrome gave our patient the ability to remove hot chestnuts from the stove without pain. However he had to pay for this unique advantage for his specific profession with severe burn wounds on his fingers.

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Conflict of Interest

The authors declare that there is no conflict of interest.

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