SYMPTOM

Pins and needles

Pins and needles is a tingling or prickling feeling caused by changes in nerve signals.

WHAT IT FEELS LIKE
Tingling, prickling, buzzing, or a limb "falling asleep"

WHERE IT IS FELT
Usually hands, feet, arms, or legs

MOST COMMON CAUSES
Temporary nerve pressure, awkward posture, irritated or trapped nerves

WHEN IT IS URGENT
Sudden tingling with weakness, facial droop, or speech trouble

USUALLY LASTS
Minutes after pressure; longer when nerves stay irritated

SEE A DOCTOR IF
It persists, keeps returning, spreads, or affects daily activities

Overview

Pins and needles is a tingling, prickling, or buzzing feeling in the skin. The medical term is paresthesia . It happens when the nerves that carry signals between your body and brain are temporarily disturbed or damaged.

A common example is an arm or leg "falling asleep" after you sit or lie on it. Pressure briefly affects the nerve and its blood supply. The feeling usually improves after you change position.

Pins and needles can also come from an irritated or trapped nerve, a health condition affecting several nerves, or certain medicines. The location, timing, and other symptoms help narrow down the possible cause.

What it may feel or look like

Pins and needles may feel like:

It often affects the hands, fingers, feet, or toes. It can also travel along an arm or leg. Some people notice it on one side, while others have similar symptoms in both hands or both feet.

There may be no visible skin change. However, swelling, a rash, skin colour changes, or muscle

weakness can provide clues about the cause.

Notice when the feeling starts, how long it lasts, and whether certain positions or activities trigger it. Also note any pain, weakness, balance problems, or loss of bladder or bowel control.

- Tiny pricks, fizzing, buzzing, or crawling under the skin
- Mild burning or an "electric" sensation
- Numbness mixed with tingling
- Reduced sensitivity to touch, heat, or cold

Common causes

Temporary pressure on a nerve is the most familiar cause. Crossing your legs, leaning on an elbow, sleeping on an arm, or wearing tight footwear can produce short-lived tingling. It should ease after the pressure is removed.

An irritated or trapped nerve can cause repeated or longer-lasting symptoms. Carpal tunnel syndrome affects a nerve at the wrist and commonly causes tingling in the thumb, index, and middle fingers. A nerve irritated in the neck or lower back may send tingling down an arm or leg.

Fast breathing , sometimes during anxiety or a panic episode, can cause tingling around the mouth or in both hands. This happens because overbreathing changes the level of carbon dioxide in the blood.

Less common causes include conditions that affect many nerves, called peripheral neuropathy . Diabetes is one possible cause. Others include vitamin B12 deficiency, heavy alcohol use, reduced thyroid function, kidney disease, infections, and some medicines, including certain cancer treatments.

Migraine aura can sometimes cause tingling that gradually spreads over several minutes, often before or during a headache. Shingles may begin with tingling, burning, or pain before a one-sided blistering rash appears.

Rarely, sudden or rapidly worsening tingling can be linked to a problem in the brain or spinal cord. These causes usually produce other symptoms as well.

When to seek medical care

Call emergency services if pins and needles begins suddenly and comes with:

These combinations can point to a stroke or serious pressure on the brain, spinal cord, or nerves. Do not drive yourself if emergency care is needed.

Seek same-day medical advice if the tingling is rapidly spreading, is accompanied by new weakness, or is getting noticeably worse over hours or days.

For routine follow-up, book an appointment if the feeling does not settle, keeps returning, wakes you from sleep, or interferes with walking, grip, work, or sleep. You should also arrange an assessment if you have ongoing tingling in both feet, especially if you have diabetes or another condition that can affect nerves.

- Weakness or numbness on one side of the body
- A drooping face, confused speech, or trouble understanding words
- Sudden loss of vision, severe dizziness, or a severe unusual headache
- Inability to move a limb, walk safely, or breathe normally
- Tingling after a serious head, neck, or back injury
- Numbness around the genitals or buttocks with new bladder or bowel problems

How the cause is found

A healthcare professional will ask where the tingling occurs, when it began, and whether it is constant or comes and goes. They may ask about injuries, repetitive activities, alcohol use, medicines, diet, diabetes, and other symptoms.

An examination may check your skin sensation, muscle strength, reflexes, balance, circulation, and the movement of nearby joints. The pattern can suggest whether one nerve, a nerve root near the spine, or several nerves are involved.

Blood tests may be used to look for causes such as diabetes, vitamin B12 deficiency, thyroid problems, or kidney disease. Tests are chosen according to your symptoms and medical history.

If symptoms persist or the cause remains uncertain, nerve conduction studies may measure how well electrical signals travel through your nerves. Electromyography tests the electrical activity of muscles. A scan may be considered when symptoms suggest pressure on a nerve, the spinal cord, or the brain.

Treatment and self-care

Treatment depends on the cause. Short-lived tingling from pressure usually needs no medical treatment. Change position, gently move the affected limb, and give normal feeling time to return.

If an activity repeatedly triggers symptoms, adjust your posture or equipment and take regular breaks. Avoid leaning on your elbows for long periods, and make sure footwear is not too tight.

Protect areas with reduced feeling. Check the skin for cuts or blisters, test bath water with an unaffected body part, and avoid direct heat pads that could cause a burn.

A trapped nerve may improve with activity changes, physical therapy, a splint, or other treatment based on its location and severity. When an underlying condition is responsible, managing that condition may reduce further nerve damage.

Do not start high-dose vitamin supplements solely for tingling without medical advice. Too much vitamin B6 can itself damage nerves. A clinician or pharmacist can also review whether a prescribed or non-prescribed medicine could be contributing. Do not stop prescribed treatment without advice.

What to expect

Pins and needles caused by pressure usually fades within minutes once you move. Symptoms from an irritated nerve may come and go with certain positions or activities.

Nerves recover slowly. If a nerve has been injured, improvement may take weeks or months. Recovery depends on the cause, how long the nerve has been affected, and whether the underlying problem can be treated.

Some forms of peripheral neuropathy are long-lasting. Treatment may still reduce discomfort, support movement, and help prevent injuries. Arrange follow-up if symptoms spread, weakness develops, or the original plan is not helping.

Common questions

Is pins and needles the same as numbness?

Not exactly. Pins and needles is an abnormal tingling sensation. Numbness means reduced or absent feeling. They often occur together because both can result from disrupted nerve signals.

Can anxiety cause pins and needles?

Yes. Breathing faster or more deeply than your body needs can cause tingling around the

mouth, hands, or feet. Similar symptoms can have other causes, so recurring or unexplained episodes should still be discussed at a routine appointment.

Why do I get pins and needles at night?

Sleeping with a wrist bent or pressure on an arm can temporarily compress a nerve. Repeated nighttime tingling in particular fingers may occur with carpal tunnel syndrome, but an assessment is needed to identify the cause.

Does tingling always mean nerve damage?

No. Brief tingling after sitting or sleeping awkwardly is usually temporary. Persistent, spreading, or recurring symptoms are more likely to need assessment for ongoing nerve irritation or another cause.

Sources

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