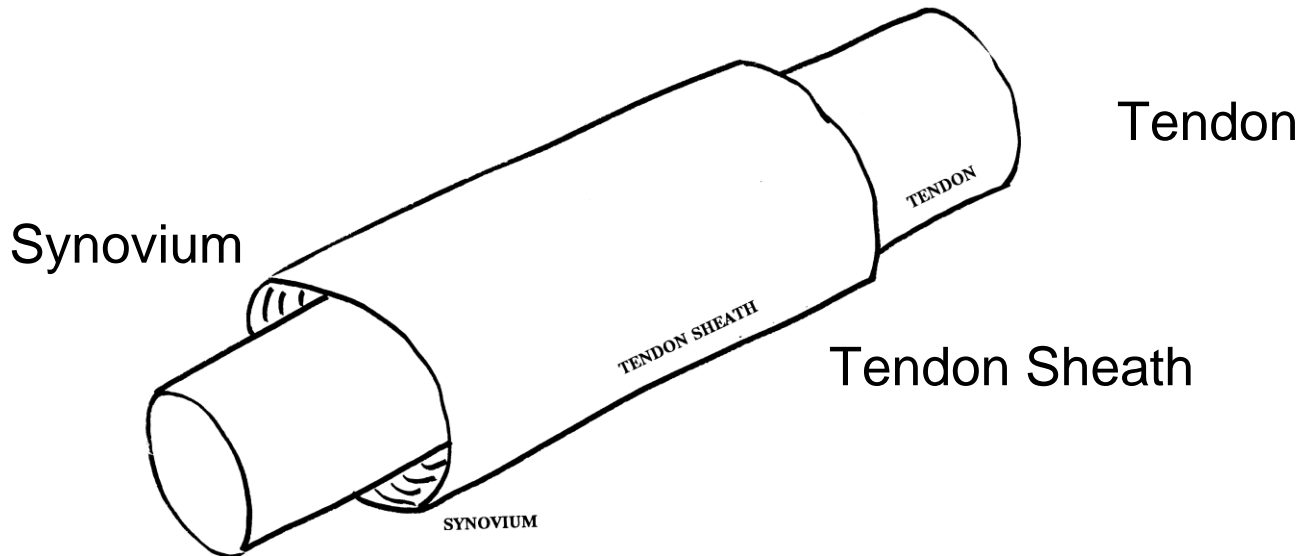


Name: _____

Date _____

TENOSYNOVITIS (Trigger Finger)



TREATMENT:

CONSERVATIVE

1. Medication
2. Splint
3. Cortisone Injection

SURGERY

1. Release of trigger finger
2. 15 - 20 minutes
3. Outpatient
4. Local anesthetic w/sedation
5. Stitches out in 10 days

MAJOR RISKS:

1. Bleeding
2. Infection
3. Scar
4. Injury to tendon or nerve
5. Swelling
6. Pain or soreness
7. Numbness
8. Stiffness
9. Recurrence
10. No Better
11. Worse

Trigger Finger

Stenosing tenosynovitis is commonly known as “trigger finger” or “trigger thumb.” The tendons that bend the fingers glide easily with the help of pulleys. These pulleys hold the tendons close to the bone. This is similar to how a line is held on a fishing rod (**Figure 1**). Trigger finger occurs when the pulley becomes too thick, so the tendon cannot glide easily through it (**Figure 2**).

Causes

Trigger fingers are more common with certain medical conditions such as rheumatoid arthritis, gout and diabetes. Repeated and strong gripping may lead to the condition. In most cases, the cause of the trigger finger is not known.

Signs and Symptoms

Trigger finger may start with discomfort felt at the base of the finger or thumb, where the finger joins the palm. This area is often sensitive to pressure. You might feel a lump there. Other symptoms may include:

- Pain
- Popping
- Catching feeling
- Limited finger movement

Treatment

The goal of treatment in trigger finger is to eliminate the swelling and catching/locking, allowing full, painless movement of the finger or thumb.

Common treatments include, but are not limited to:

- Night splints
- Anti-inflammatory medication
- Changing your activity
- Steroid injection

If non-surgical treatments do not relieve the symptoms, surgery may be recommended. The goal of surgery is to open the pulley at the base of the finger so that the tendon can glide more freely. The clicking or popping goes away first. Finger motion can return quickly, or there can be some stiffness after surgery. Occasionally, hand therapy is required after surgery to regain better use.

Figure 1: The pulley and tendon in a finger, gliding normally.

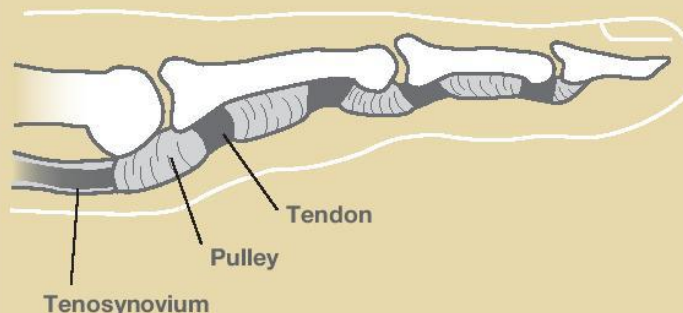


Figure 2: If the pulley becomes too thick, the tendon cannot glide through it.

