Trigger Finger
Digital Tendinitis and StenosingTenosynovitis

Trigger finger is a common disorder that causes an often painful catching of the fingers or thumb. It occurs as a clicking, snapping or locking of a finger in the palm of the hand. The reason for this is that there is a problem with the tendons which flex the fingers sliding smoothly through their sheaths. The cause of this may be inflammation of the tendon and sheath, or from a thickening or nodule in the tendon. The condition may occur in any finger or a couple fingers at the same time. The cause may be overuse while doing the same activity over and over again with your hands.

Tendons are the tough cords that connect the muscles to bones. Muscles and tendons are part of the system which allows your body to move. When muscles contract in the forearm on the palm side, they pull the tendons toward the elbow and cause the fingers and thumb to bend *(flex)* toward the palm. These are the flexor tendons. The tendons slide through a slippery smooth membrane *(synovium)* which is called the tendon sheath. The sheaths have areas of tough fibrous tissues surrounding them which hold the tendons close to the bone. These are called pulleys because they work like a pulley. The first pulley is in the palm of the hand near the crease which runs across your palm. If the area of the tendon thickening is near the pulley, the tendon cannot slide smoothly through the pulley and this causes the trigger finger.

The finger may lock with the finger curled or suddenly straighten out with a snap. This is more common in patients with rheumatoid arthritis and diabetes. Left untreated, the condition may get worse to the point where the finger becomes locked in flexion, like making a fist, or less commonly locked with the finger straightened out.

DIAGNOSIS
Your caregiver will easily make this diagnosis on examination.

TREATMENT
- Splinting for 6 to 8 weeks of time may be helpful. Use the splints as your caregiver suggests.
- Heat used for twenty minutes at least four times a day followed by ice packs for twenty minutes unless directed otherwise by your caregiver may be helpful. If you find either heat or cold seems to be making the problem worse, quit using them and ask your caregiver for directions.
- Cortisone injections along with splinting may speed up recovery. Several injections may be required. Cortisone may give relief after one injection.
- Only take over-the-counter or prescription medicines for pain, discomfort, or fever as directed by your caregiver.
- Surgery is another treatment that may be used if conservative treatments using injection and splinting does not work. Surgery can be minor without incisions (a cut does not have to be made) and can be done with a needle through the skin. No stitches are needed and most patients may return to work the same day.
- Other surgical choices involve an open procedure where the surgeon opens the hand through a small *incision* (cut) and cuts the pulley so the tendon can again slide smoothly. Your hand will still work fine. This small operation requires stitches and the recovery will be a little longer and the incisions will need to be protected until completely healed. You may have to limit your activities for up to 6 months.
- Occupational or hand therapy may be required if there is stiffness remaining in the finger.

CARE AFTER SURGERY
- Elevate your hand above your heart and use ice as instructed.
- Follow instructions regarding finger motion/exercise.
- Keep the surgical wound dry for at least 48 hrs or longer if instructed.
- Keep your follow-up appointments.

- Return to work and normal activities as instructed.

SEEK IMMEDIATE MEDICAL CARE IF:

Your problems are getting worse or you do not obtain relief from the treatment.

COMPLICATIONS

Complications are uncommon but some problems that may occur are:

- Recurrence of the trigger finger. This does not mean that the surgery was not well done. It simply means that you may have formed scar tissue following surgery that causes the problem to reoccur.
- Infection which could ruin the results of the surgery and can result in a finger which is frozen and can not move normally.
- Nerve injury is possible which could result in permanent numbness of one or more fingers.

Document Released: 10/07/2005 Document Re-Released: 03/14/2011
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