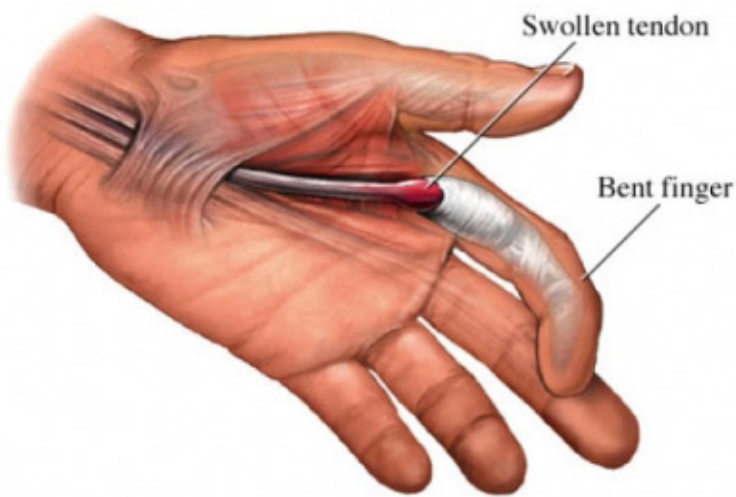


TRIGGER FINGER

What Causes Trigger Finger?

Trigger finger is a form of tendonitis that affects the hand. It presents as pain and snapping as you try to move the affected finger. In patients with trigger finger, the tendons that flex the fingers and thumb become irritated and swollen as the tendon slides through the tendon sheath. The “trigger” occurs when the tendon becomes momentarily stuck and then pops as it slips past the swollen area. Sometimes the finger just feels stiff and the “trigger” is not present. The causes of the problem are unknown. However, trigger fingers are more common in women than men, occur frequently between 40 to 60 years of age and are more common in people with diabetes and rheumatoid arthritis.



Symptoms

Symptoms usually start without any injury. There may be pain in the palm, along with swelling or a small lump and a catching or popping sensation in the finger or thumb joints. Symptoms tend to be worse when you awake in the morning and will often loosen up with movement. In severe cases the finger may become stuck in a bent position so that it can't be straightened. Over time joint contractures or stiffness can become permanent. One or more fingers can be involved.

Treatment

Over-the-counter medications such as Tylenol or Advil can be used for pain. A cortisone injection is often recommended and up to two injections can be given. This may be corrective but for some patients it may only bring temporary relief. Relief from an injection is less likely when the triggering has been present for a long time, or if you have associated medical problems such as diabetes. If the problem does not respond to injections, surgery may be recommended.

Surgery

The decision to proceed with surgery is based on the severity of your symptoms. Surgery may be recommended to prevent permanent stiffness of the finger. Surgery is performed in an outpatient surgery center and involves a small incision in the palm. Surgery releases the tendon at the area of swelling. Some pain in the palm is common after surgery but most patients are able to move the finger immediately after the procedure. If the finger remains stiff occupational therapy may be recommended to restore normal range of motion.

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