



What is a Trigger Finger?

Trigger finger is a common condition. The tendons that bend the fingers and thumb run through a series of pulleys which form a tunnel on the palmar ('palm side') surface of the bones. These pulleys hold the tendons close to the bones and stop them from 'bow-stringing' away from the bones as the finger bends. In trigger finger, the tendons catch at the tunnel entrance at the base of the finger. The finger can catch and click when bending and straightening, and this may be painful. Over time the tendon can become thickened and inflamed where it catches, and the tunnel entrance may also become narrowed. These changes can make the pain and clicking more severe. Sometimes the finger can become stuck in a bent position and have to be manually straightened.

What causes Trigger Finger?

Some trigger fingers may be associated with underlying medical conditions such as Diabetes, Rheumatoid Arthritis or Gout. Local trauma around the base of the finger, or unaccustomed repetitive gripping activity may sometimes precipitate the onset of symptoms. In most cases of trigger finger there is no clear cause.

How is it diagnosed?

Trigger finger is usually diagnosed by history and physical examination. Sometimes an Ultrasound is required.



How is it treated?

Early on in the course of trigger finger a splint, made by a hand therapist, may help relieve the symptoms. A steroid injection around the tendons at the tunnel entrance can decrease inflammation in the area and relieve symptoms in up to 75% of cases, depending on how long the symptoms have been present for. In longstanding cases, or where symptoms recur after a cortisone injection, surgery may be required. With surgery a small incision is made in the palm and the tunnel entrance is opened to make more room for the tendons to pass through without catching. This is usually performed under local anaesthetic in the operating theatre.

Active movement of the finger is encouraged immediately after surgery. Your hand will be in post-operative dressings for 1-2 weeks. After the dressings are removed local pressure on the incision with heavy gripping may be uncomfortable for several weeks.

These notes are an overview provided for information and education purposes only and not for the purpose of specific medical advice.

Please seek the advice of your surgeon with any questions regarding medical conditions and treatment.