Trigger Finger





(Left) The patient's finger sticks in the bent position as she tries to straighten it.

Trigger finger limits finger movement. When you try to straighten your finger, it will lock or catch before popping out straight. This is a condition that affects the tendons in your fingers or thumb.

Anatomy

Tendons are tissues that connect muscles to bone. When muscles contract, tendons pull on bones. This is what causes some parts of the body to move. The tendon sheath attaches to the finger bones and keeps the flexor tendon in place as it moves.

The flexor tendons control the movements of the fingers and thumb. When you bend or straighten your finger, the flexor tendon slides through a snug tunnel, called the tendon sheath; this keeps the tendon in place next to the bones.

The flexor tendon can become irritated as it slides through the tendon sheath tunnel. The tendon sheath may also become irritated over time. Trigger finger occurs when the tendon becomes "stuck" at the opening of the tunnel. You might feel a "pop" as the tendon slips through the tight area and your finger will suddenly shoot straight out.



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Cause

The cause of trigger finger is usually unknown. There are factors that put people at greater risk for developing it:

- Trigger fingers are more common in women than men.
- They occur most frequently in people who are between the ages of 40 and 60 years of age.
- Trigger fingers are more common in people with certain medical problems, such as diabetes and rheumatoid arthritis.
- Trigger fingers may occur after activities that strain the hand.

Symptoms

Symptoms of trigger finger usually start without any injury, although they may follow a period of heavy hand use. Symptoms may include:

- A tender lump in your palm
- Swelling
- Catching or popping sensation in your finger or thumb joints
- Pain when bending or straightening your finger

Stiffness and catching tend to be worse after inactivity, such as when you wake in the morning. Your fingers will often loosen up as you move them.

Sometimes, when the tendon breaks free, it may feel like your finger joint is dislocating. In severe cases of trigger finger, the finger cannot be straightened, even with help. Sometimes, one or more fingers are affected.



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Examination

Your doctor can diagnose the problem by talking with you and examining your hand. No other testing or x-rays are usually needed to diagnose trigger finger.

Nonsurgical Treatment

- Rest: a splint may be used to keep your finger in a resting position
- Medications: NSAIDS, Acetaminophen
- Steroid injections can usually resolve the problem 80-90% of the time

Surgical Treatment

Trigger finger is not a dangerous condition. The decision to have surgery is a personal one, based on how severe your symptoms are and whether nonsurgical options have failed. In addition, if your finger is stuck in a bent position, your doctor may recommend surgery to prevent permanent stiffness.

Surgical Procedure

The goal of surgery is to widen the opening of the tunnel so that the tendon can slide through it more easily. This is done on an outpatient basis, usually under local or regional anesthetic.

The surgery is performed through a small incision in the palm or sometimes with the tip of a needle. The tendon sheath tunnel is cut. When it heals back together, the sheath is looser and the tendon has more room to move through it. During surgery, the tendon sheath is cut.



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Complications

- Incomplete extension due to persistent tightness of the tendon sheath beyond the part that was released
- Persistent triggering due to incomplete release of the first part of the sheath
- Bowstringing due to excessive release of the sheath
- Infection

Recovery

- Free movement immediately after surgery is common
- Soreness in palm is common following surgery
- Complete recovery usually occurs within a few weeks; swelling and stiffness may not completely resolve for up to 6 months. If your finger was quite stiff before surgery, physical therapy and finger exercises may help loosen it up.

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