

Understanding Trigger Finger

Has one of your fingers ever become stuck in a bent position, becoming painful and difficult to straighten after holding your cup of coffee? Or, does your finger click when you are holding a knife and fork? If so, then you may be experiencing trigger finger.

Stenosing tenosynovitis, commonly known as trigger finger, is a condition where the lining of the flexor tendon becomes thick or swollen. The increased thickness and swelling compresses the tendon preventing it from gliding smoothly. This can cause the tendon to click or get stuck and lock. Prolonged irritation through repetitive use of the hand may cause scarring and the formation of nodules. According to the National Center for Biotechnology Information, 2% to 3% of the population will experience trigger finger in their lifetime, but increases to 10% in the diabetic population. Women are six times more likely than men to develop trigger finger and the average age of onset is 50 or older. Evidence suggests that the ring finger is the most commonly affected finger followed by the thumb, but all of the digits can be affected.

Let's review the basic anatomy of trigger finger. Each finger has tendons that run on the palm side of the finger that are responsible for flexing or bending the finger. These tendons are surrounded by a protective sheath and run through a system of pulleys that help to keep the tendon in place. In most cases, the most common location for trigger finger is at the base of the finger on the palm side of the hand at the large knuckle called the metacarpophalangeal joint (MCP). This is the area of the A1 pulley and it is prone to irritation due to the high levels of force applied during gripping. You can think of the A1 pulley as the eye of a sewing needle and the flexor tendon in its sheath as a piece of thread. When the tendon sheath becomes swollen and irritated it would be like trying to thread twine through the sewing needle; it would become stuck.

Signs and Symptoms

- Stiffness in your finger
- Tenderness and/or a nodule at the base of the finger
- Locking of your finger in a bent position and then it will pop straight or need to be straightened using your other hand.
- Popping or clicking when you move your finger

Causes and Risk Factors

The exact cause of trigger finger is not known. There are several factors that could contribute to trigger finger including some of the following.

- Repetitive use of the hand.
- Prolonged use of hand held tools.
- Local trauma to the hand/finger.
- Degenerative forces and stress to the hand.

Research has shown that individuals with diabetes, rheumatoid arthritis, carpal tunnel syndrome, and DeQuervain's tendonitis are at higher risk for developing trigger finger.

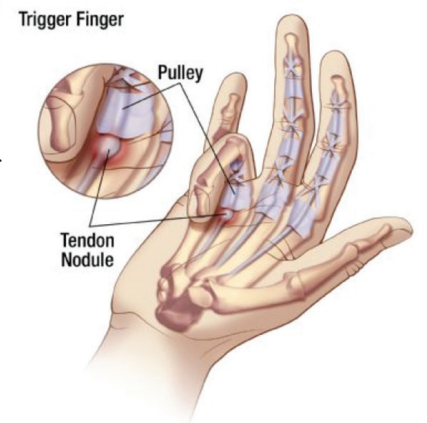
Treatment Options

There are several treatment options for trigger finger ranging from conservative techniques, including occupational or physical therapy, to surgical intervention. Some of the treatment options include:

- Splinting the involved finger to help decrease friction at the A1 pulley and decrease inflammation. The finger splint is typically worn during times of activity during the day and can be used at nighttime as well. An occupational therapist would be able to fabricate a custom trigger finger splint.
- Activity modification, including rest, to reduce irritation to the involved finger while maintaining the ability to participate in your daily activities.
- Corticosteroid injection.
- Surgical release of the trigger finger. Surgery is typically indicated when conservative treatments are unsuccessful and has proven to alleviate trigger finger symptoms.

Trigger Finger can have a significant impact on the use of your hand and your daily routine. Recognizing and addressing symptoms early is a key factor in treating trigger finger. At All Care Physical Therapy, our Certified Hand Therapist specializes in the treatment of trigger finger and other hand disorders.

Contact your physician if you are experiencing these symptoms and ask if an Occupational therapist at All-Care can help. OT Hand Therapy is currently practiced in our Toms River (732-505-1300) or Whiting (732-849-0700) locations.



**JESSICA ABRAHAM,
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Jessica Abraham received her Master's Degree of Science in Occupational Therapy from Richard Stockton College of New Jersey in 2006. She became a certified hand therapist in 2014.

Jessica's professional focus has been in outpatient upper extremity orthopedic care with a focus in hand therapy. She has completed affiliations in hand therapy, outpatient orthopedic rehabilitation, and pediatrics. Jessica's areas of interest include splint fabrication for the upper extremity, neural mobilization techniques, and manual therapy.

Jessica has continued her education by taking courses such as:

- Completed over 4,000 hours in Hand Therapy Treatment
- Neural Mobility: Examination and Intervention Strategies
- The Elbow: Current Trends in Assessment and Treatment
- 2011 Surgery and Rehabilitation of the Hand with Emphasis on the Elbow and Shoulder
- Incorporating Yoga into Upper Extremity Rehabilitation



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