



Trigger Finger Anatomy

Trigger Fingers

Triggering of the digits is caused by a thickening on the tendon which catches as it runs through a pulley at the base of the fingers or thumb. The most common symptom is a finger that seems to catch or stick down in the palm and then has to go back to its normal position with a clunk or even need help from the other hand. Sometimes you can feel this nodule in the palm of the hand as you move the finger.

Treating Trigger Fingers

The majority of trigger fingers can settle with a steroid injection around the tendon. This reduces the size of the nodule and allows it to glide freely in and out of the sheath again. Up to 90% of patients settle with a single injection. After the steroid injection the hand is usually sore for a day or two before it starts getting better. Most patients notice an improvement by two weeks after the injection but as the action of the steroid lasts for six weeks the injection is not deemed to have failed until you get to this stage and still have symptoms. Should the

symptoms recur then a simple local anaesthetic procedure can be performed to release the sheath. This stops the tendon catching at the base of the finger and it will therefore no longer catch or trigger. It is unusual for the surgery not to cure the condition completely, but it can come in other fingers.

Recovering from Surgery

After surgery the hand has a dressing on it which will leave the thumb and fingers free enough for light activities. The bulky dressing can be taken down after five days and replaced with a small adhesive dressing which we will give you. At ten days the hand can be used again normally. The absorbable sutures will fall out on their own once the wound is exposed. Sometimes the finger feels a bit stiff for a few weeks after this surgery although it is not catching any more. These symptoms settle as the hand is used normally.

Mr Paul Davey Orthopaedic Hand & Wrist Surgeon

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