



York and Scarborough
Teaching Hospitals
NHS Foundation Trust

Trigger Finger/Thumb

(Flexor Tendinitis) including surgery
information

Information for patients, relatives and carers

Trauma & Orthopaedics

① For more information, please contact:

The York Hospital

Orthopaedic Out Patient Clinic York Tel: 01904 726537
Advanced Practitioner Hand Surgery Tel: 01904 725978
Hand Physiotherapist Tel: 01904 725390

Wigginton Road, York, YO31 8HE

Bridlington Hospital

Kent Ward, Bridlington Hospital Tel: 01262 423110
Bessingby Road, Bridlington, East Yorkshire, YO16 4QP

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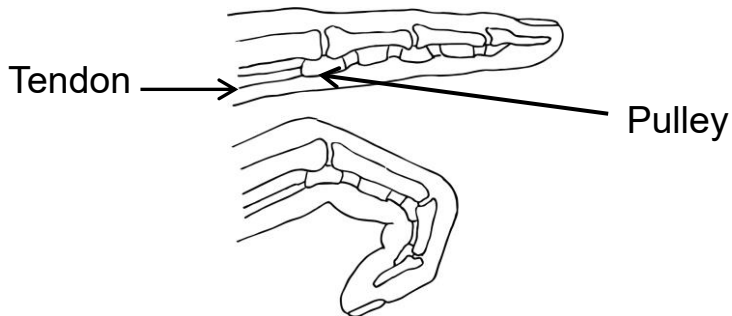
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What is Trigger Finger?

Flexor Tendinitis is commonly known as Trigger Finger or Trigger Thumb. It involves the pulleys and tendons in the hand that bend the fingers. It is a common problem because of the way the hand is made.

There are no muscles in the fingers themselves. We actually move our fingers by remote control. Muscles in the forearm are connected to the bones in the finger by smooth, flexible strings, called tendons.

The tendons pass through pulleys. The pulleys form a tunnel under which the tendons must glide. These pulleys hold the tendons close against the bone. The tendons and the tunnel have a smooth lining that allows easy gliding inside the pulleys. The muscles pull on the tendons, which then bend the finger joints.



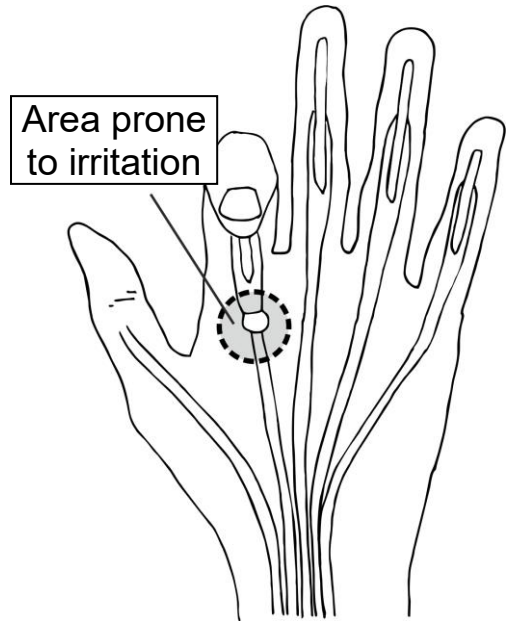
The flexor tendons are smooth, flexible, cord like structures. They work like a bicycle brake cable to bend your fingers, sliding in and out of the finger as it straightens and bends. This arrangement allows the fingers to be slender yet have all the strength of the large muscles in the forearm.

What causes Trigger Finger?

Tendon swelling (tendinitis) results from a person's own tendency to collect fluid around their tendons and joints. People over 40 years of age with a history of diabetes or rheumatoid arthritis are especially at risk of developing this condition. Tendinitis may be aggravated by repetitive or strenuous activities. When the tendons that bend the fingers (the flexor tendons) become irritated, they can cause pain, swelling and stiffness.

Tendon swelling interferes with the normal movement of the tendons and can cause the finger to click, catch ("triggering") or lock in position.

The tendons enter a tube (the tendon sheath) at the level of the knuckle joints. The sheath runs the length of the finger. The problem area is just at the entrance, where the restraint is the most snug. This is typically where the worst inflammation and irritation occurs.



Trigger fingers may result in tenderness and swelling in the palm and stiffness, pain and clicking in the finger joints.

What can I do to help?

- Apply ice for five to fifteen minutes at a time on the area that is most swollen and tender.
- Take “over the counter” non-steroidal anti-inflammatory medication (NSAID), such as Aspirin or Ibuprofen. Check with your Pharmacist regarding possible side effects and drug interactions.
- Avoid activities, which involve a continuous grip.
- Hold off the use of grip strengthening devices or exercises involving repetitive squeezing. These exercises put stress on the irritated tendon.
- Sometimes splinting the finger straight overnight can help settle symptoms.
- Wait and watch.

What can the doctor do to help?

Your Doctor can confirm that this is actually the problem.

- They can prescribe stronger NSAID medication or cortisone (steroid) type medication or hand therapy,
- Give a cortisone injection into the sore area. Usually a maximum / up to three injections are given into one finger because more may lead to complications, such as tendon rupture.
- Perform surgery.

How successful is treatment?

Cortisone injections usually provide effective pain relief and enable patients to regain strength and function during the period the medication is active.

Symptoms may return over a few months. If this happens other options can be considered.

If a cortisone injection is not beneficial, surgery can be a more permanent solution. Surgery can provide permanent relief from locking and triggering in the great majority of patients.

After surgery, symptoms may reoccur in a few people. Swelling, stiffness aches and pains in the fingers may well be due to other problems, and may persist to some extent following any form of treatment. Many patients with trigger fingers also have a tendency to have swelling, stiffness and soreness of the moving parts of their hands, and that is not changed by surgery.

With this in mind, the great majority of patients are improved with appropriate treatment.

What happens if I have no treatment?

This depends on how much it is bothering you. It really is a quality of life issue. This is not a problem that can spread to other parts of your body. Some people have triggering which resolves over a period of months.

Other than persistent pain and stiffness, the additional problem that may develop is a permanent partial bend of the middle joint of the finger. This is more likely the longer the triggering has been going on.

The main reason to do surgery is to relieve pain and allow smooth movement of the tendon. Some people will have a mild problem, which flares up from time to time. Other people will choose to treat it themselves or ignore it. Others will have a severe problem. This will prevent them from doing many things with their finger and feel that they have no choice but to have surgery.

What happens if I have surgery?

The following pages contain information about the operation for trigger finger release. It explains a little about what will happen before, during and after your operation and tries to answer some of the questions you may have.

The doctors and nurses are there to help you. They will always make time to listen to you and answer your questions. If you do not fully understand anything about your operation, please ask.

Please bring with you your completed admission form with you when you come for your operation.

If you become ill or cannot keep your appointment for any reason, please tell us as early as possible so that another patient can be offered treatment.

We will rearrange your appointment.

Here are the department telephone numbers. Please ring the department where you are being treated:

Day Unit Waiting List for York Hospital
Tel: 01904 725541

York Clifton Park Clinic: Tel: 01904 721963

Waiting List for Scarborough/Bridlington Hospitals
Tel: 01723 342078

Kent Ward at Bridlington Hospital
(If cancelling on the day of your appointment)
Tel: 01262 423110

On the day of your operation

On the day of your operation, wear garments with loose and wide sleeves, as you will have a large bandage on your hand after the operation. Ladies may find it helpful to wear a front fastening bra if they have one.

What happens when I arrive on the Day Unit or on the ward?

The nurses introduce themselves to you and explain what will happen to you during your stay. You will be asked about your present medicines, any allergies you may have, your arrangements for going home and who is to look after you.

The surgeon or specialist nurse will check your details with you and (if this has not already been done) ask you to sign a consent form (FYCON48-1 Trigger Finger) saying that you:

- Fully understand your operation and anaesthetic
- Fully understand the risks and benefits
- Are aware of the alternatives and
- Agree to have the operation

The form will be kept in your patient notes and you will also be given a copy for your own records.

Please help us to make sure that your surgery will go ahead by following these instructions:

If you are taking medication to 'thin the blood' you need to contact us regarding advice on the need to stop this medication prior to surgery. It may be necessary to stop your medication for as much as ten days.

If you are having a local anaesthetic for your operation, you do not need to follow rules 1, 2, 3 and 5.

Please follow the rules below:

1. You should have **no** food or cloudy drinks during the **six** hours before your admission.
2. You should drink plenty of clear fluids (those you can see through) until **two** hours before your admission.
3. You should not have anything to eat or drink during the **two** hours prior to your admission.
4. Do bath or shower as usual before your admission.
5. Do bring a clean dressing gown with you if you wish.
6. **Do keep all jewellery at home apart from a wedding ring unless it is on the hand to be operated on. If this is the case you will need to remove it.**
7. Nail varnish must be removed before surgery. Please remove varnish on the finger or fingers of the hand(s) you are having surgery on so we can observe your circulation during and after your operation.
8. Do bring something to help pass the time while you wait e.g. books, magazines.

Please ask if there is anything about which you are uncertain or do not fully understand about your treatment.

What happens before surgery?

If you are having a general anaesthetic, you are asked to change into a theatre gown and one of our dressing gowns. You may prefer to bring your own but it must be clean as you are going into an operating theatre area. You will be taken to the operating theatre where your identity is checked as part of the safety procedures.

We will mark your hand and arm with a semi-permanent marker pen before surgery.

What happens during surgery?

In the operating theatre, we will put a tight strap (tourniquet) around your arm or finger to stop bleeding during the procedure so the surgeon has a good view of the operation site.

We will wash your hand and arm with a disinfectant.

What kind of anaesthetic will I have?

Your operation will usually be carried out with a local anaesthetic. You will be awake throughout the operation.

Local anaesthetic is injected into the skin of your palm at the level of the big knuckle joint of your finger/thumb that is suffering from trigger finger. This is where the cut will be made.

Some surgeons perform trigger thumb surgery with a regional anaesthetic, because it can be difficult to numb the thumb using local anaesthetic. This will be discussed with you before surgery. We will give you more information in a leaflet 'about the anaesthetic for your hand operation'.

At the time of your surgery, if you are having a local anaesthetic, you will go into the recovery area to have this injection. Local anaesthetic is injected around the operation site. This should keep the finger/thumb comfortable during the operation and for around an hour afterwards.

If you are having a general or regional anaesthetic, you will first go to the anaesthetic room where you will be given your anaesthetic. If this is a regional anaesthetic, you will then go to the recover area where a nurse will monitor you, whilst your arm goes numb.

When you are ready, you will be taken into the operating theatre. Your identity is checked as part of our safety procedures.

If you have a general anaesthetic, you will be asleep during the operation. If you have regional or general anaesthetic, you may be asked to come to hospital on a date before your operation for a pre-operative assessment. On the day of your operation, your anaesthetist will speak to you to discuss any concerns you may have, any medications you are taking and check when you last had something to eat or drink.

You will be given a leaflet called “What you need to know when coming into hospital for surgery”. You can find more information about anaesthetics from the Royal College of Anaesthetists on the internet.

What are the benefits of surgery?

Relief of pain and allow smooth movement of tendon.

What are the risks of surgery?

- Nerve injury (occurs in 5 in 100 cases) slightly increased risk when undergoing trigger thumb release.
- Reoccurrence (occurs in less than 5 in 100 cases).
- Wound infection (occurs in 1 in 100) cases.
- Excessive soft tissue swelling (occurs in less than 3 in 100) cases).
- Tenderness in the palm of the hand around the wound site. This is quite common as the wound heals but can last several weeks.
- A rare complication of all hand surgeries whether simple or complex is Complex Regional Pain Syndrome (CRPS) or Reflex Sympathetic Dystrophy (RSD). It occurs in less than one in 500 cases. It can result in severely painful and stiff hands and loss of use of the hand that can persist and be difficult to treat. The cause is unknown. You may require further treatment including pain relief and therapy. Your hand can take months or years to recover. Sometimes there is permanent finger stiffness.

What happens after my operation?

If you have a general anaesthetic, you are taken to the recovery area where a nurse will monitor your progress. When the nurse is happy with your recovery, you return to your trolley or bed in the ward area. When you are able to sit up you will be offered a drink. If you have a local anaesthetic, you return to a chair on the Day Unit.

When can I go home?

You will be able to go home with an adult who can look after you when it is felt you are ready. A member of your surgeon's team may see you before you go home.

You must not drive yourself or use public transport.

Before you leave the hospital

A nurse will go through the discharge instructions with you and tell you about the care you need at home. The nurse will give you the necessary follow-up papers and appointments. Please ask if you are unsure of any of the instructions.

You will have a small white dressing over your wound. This will be protected with a large, bulky dressing of cotton wool and a crepe bandage that will cover most of your hand and wrist.

You should keep the bulky dressing in place for three to four days following your operation to protect your wound and to apply compression to help prevent excessive bleeding and swelling. You will also need to wear a sling for three to four days. A nurse will put your sling in place before you go home.

How do I care for my dressing and wound after my operation?

All dressings must be kept dry; if the dressing gets wet it needs to be changed straight away. It is very important that you keep your dressings dry, to minimise the risk of infection. When washing with the bulky dressing in place, you may fit a plastic bag over your hand and arm and seal it with tape to keep it dry. Remove the bag as soon as you have finished washing so that perspiration does not wet your dressing.

Your wound may become hard along its scar. This is due to the swelling and formation of the scar tissue. The swelling eventually disappears. Some patients experience tingling, numbness, pulling and itching as their wound heals. These sensations are part of the healing process. Itching can be relieved by cooling the area.

When can I remove the dressings?

You can remove the bulky dressing three to four days after your operation. You must keep the small white dressing in place and change it if it is bloodstained or gets wet. We will give you a supply of dressings on your discharge from hospital. You must keep this dressing dry. Wearing a household rubber glove when you are washing will help you do this but not for prolonged periods of time. If you do get your dressing wet, please change it immediately.

When will the stitches be removed?

The stitches are usually removed after 10 to 14 days. You can have this done at your doctor's surgery or at your local hospital's dressing clinic. The nurse will discuss this with you before you leave the ward.

How will I feel after my operation?

Usually you will have moderate pain in your hand for two to three days. If you put your hand in the air (like asking a question) and make a fist, this will prevent excessive swelling and help relieve pain. Do this for a minute, every 30 minutes as soon as you get home from surgery and for the next week to two weeks.

You are advised to take painkillers regularly over the first few days following your operation so that your pain is under control and you recover more quickly. As you begin to feel better, you will not need as many painkillers. You should reduce the amount you take gradually rather than stopping abruptly.

Your fingers might be numb. If your hand or your fingers are cold or blue, or you have pins and needles in your fingers and this is not relieved by raising your hand and moving your fingers you must loosen the bandage. If there is no improvement, contact the ward where you had surgery or your GP.

Obtain urgent advice from your GP or practice nurse if you experience any of the following:

- Swelling or tingling in your hand that is not relieved by raising it, exercises or loosening the bandage.
- You feel generally unwell or feverish.
- Have a temperature.
- Increased redness, swelling and pain around the wound which feels hard when you touch it.
- A cloudy or smelly discharge from your wound.

Do I need to do anything after the operation?

For the first seven days following your operation, you should keep your hand **raised as much as you can with your hand higher than your elbow**. This will help to reduce pain and swelling. Support your hand on cushions when you are sitting. You should not walk with your hand at your side, as this will cause pain and swelling. It will help to wear a sling for the first 24 hours.

The nurse will show you how to loosen the bandage should swelling occur in the 48 hours following surgery.

As your hand heals, you should try to move your fingers and thumb regularly. Your exposed fingertips may have a slight bluish appearance caused by bruising during the operation but they should not be cold. The bruising should fade in a few days.

If your fingertips become cold, please contact the ward where you had your surgery (see useful telephone numbers at the end of this leaflet) or your GP.

Carry out the exercises you have been shown as soon as your anaesthetic wears off as follows; these will help your recovery.

It is normal to get some swelling in your hand and/or fingers after hand surgery. Swelling can delay wound healing because it stops circulation from taking nutrients to the wound to help in the healing process. It can also make infections more likely. Swelling restricts movement of the fingers and joints. If swelling continues, it can cause joint stiffness in the long term.

To keep swelling to a minimum:

1. Always rest with your hand higher than your elbow.
2. When walking, do not hang your arm by your side for more than a minute at a time.

It is very important that you start the following exercises as soon as you have had your operation. These exercises work the small muscles in your hand returning the blood to the heart and helping reduce the swelling in the soft tissues. It also helps to stop the finger joints becoming stiff.

Carry out the following exercises as soon as you get home and over the next two weeks as your bandage will allow. Do not worry about stretching your skin as the stitches will stay in place.

- every 30 minutes
- until your stitches are removed

Put your arm straight up in the air then:

1. bend and straighten the joints of your fingers that protrude out of the bandage
2. spread your fingers and thumb so that the skin on the side of the fingers feels tight and hold for 10 seconds
3. then press the fingers together really tightly and hold for 10 seconds.

Do not worry about your stitches; they will not be affected by the exercises.

Additional questions that patients sometimes ask

Can I bath or shower?

You may bath or shower as usual but please keep your dressings dry. The first time you bath or shower at home you may feel light headed or faint. You should therefore, leave the bathroom door unlocked and arrange for someone to check periodically that you are safe. You may use any safety equipment that you usually use.

Will my bowels be affected?

Due to the change in your usual routine and if you are taking painkillers containing codeine, you may experience a change in your bowel habit. This could take several days to return to normal. Drink plenty of fluids and try to eat a high fibre breakfast cereal and wholemeal bread every day. If you feel constipated and the problem is not improving, ask your local pharmacist or GP for advice.

When can I have sex again?

You can resume your usual sexual activities when you feel able to without too much pain and discomfort.

How soon can I resume my normal activities?

Depending on the job you do, you may need to make adjustments for returning to work. You will need to keep your wound clean and dry until your stitches are removed.

Because the bulky dressing covers most of your hand, you will need help with jobs such as shopping and cooking for a few days.

When can I start driving again?

Driving your car is not advisable until the bulky bandage is removed and your wound has healed. You will need to have full control of your vehicle before returning to driving. You are advised to check with your insurance company or the DVLA when you will be covered to drive again after your operation.

What should I do if I have any problems or worries about my operation after going home?

In the first 24 hours following your operation, please telephone the following, depending on where you were treated:

York

Day Unit 01904 726010
(between 7.30am and 7.30pm)

or

The nurses on the 01904 726537
Orthopaedic outpatient clinic

Out of hours contact:

Extended Stay Unit 01904 721265
(overnight Mon-Thurs)

Ward 29 (Fri - Sun) 01904 726029

Bridlington

Kent Ward 01262 423110

Or phone your consultant's secretary through the hospital switchboard (01723 368111) to make an appointment.

If you have problems out of hours or more than 24 hours after your operation, please contact your GP or attend your local emergency department if serious.

York emergency department: 01904 726587

Scarborough A&E department: 01723 387111

Tell us what you think of this leaflet

We hope that you found this leaflet helpful. If you would like to tell us what you think, please contact:
Orthopaedic Nurse Practitioner, Orthopaedics,
The York Hospital, Wigginton Road, York, YO31 8HE or
telephone 01904 725978.

Teaching, training and research

Our Trust is committed to teaching, training and research to support the development of health and healthcare in our community. Healthcare students may observe consultations for this purpose. You can opt out if you do not want students to observe. We may also ask you if you would like to be involved in our research.

Patient Advice and Liaison Service (PALS)

PALS offers impartial advice and assistance to patients, their relatives, friends and carers. We can listen to feedback (positive or negative), answer questions and help resolve any concerns about Trust services.

PALS can be contacted on 01904 726262, or email pals@york.nhs.uk.

An answer phone is available out of hours.

Leaflets in alternative languages or formats

Please telephone or email if you require this information in a different language or format, for example Braille, large print or audio.

如果你要求本資 不同的 或 式提供，電
或發電

Jeżeli niniejsze informacje potrzebne są w innym języku lub formacie, należy zadzwonić lub wysłać wiadomość e-mail

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