De Quervains’ Tenosynovitis information sheet

What is it?
First described by Swiss surgeon Fritz de Quervain, this is a condition brought on by irritation or inflammation of the wrist tendons at the base of the thumb.

What causes it?
Inflammation of the tendons at the base of the thumb or the tight sheath that they run through. The inflammation is usually caused by acute trauma or repetitive over use, such as playing squash. Pregnant women and new mums are prone to developing this problem.

What are the symptoms?
Pain and swelling over the base of the thumb and wrist joint. This may range from occasional sharp pains to severe constant ache. The pain is exacerbated by use of the thumb and wrist and may radiate up into the arm. In severe cases, patients may feel a sensation of “cracking” or “clicking” in the wrist, which is caused by the inflamed tendons sticking in the tunnels through which they slide.

Do I need any further investigations?
This condition is generally diagnosed clinically and does not need further investigation, however x-rays, MRI or ultrasound may be requested if the exact diagnosis is unclear.
**What is the treatment?**

Most early/ mild cases respond well to splinting, hand therapy and activity modification. More stubborn cases can often be cured by injection of the tendons with steroids which eases the inflammation and pain.

In cases that fail to respond to this treatment, a small operation to release the tendons from their tight sheath is performed. This is carried out under local or general anaesthetic as a day case procedure.

**How long will it take to recover?**

Recovery generally takes 3-4 weeks, although it can take many months for the tendon inflammation to settle ad the pain resolve fully. A bandage and dressing will be applied to the wrist after the operation. You will be seen by a hand therapist at 2 days who will remove this, clean and redress the wounds for you. The hand therapist will get you moving your hand very early after surgery to avoid stiffness.

The stiches are trimmed at around 10 days and Andy will review you at that point. Following your 2 week appointment your hand therapist will get you moving your hand more and more and will also advise how to help soften and desensitize the scars.

**What are the potential complications?**

- **Infection** - Uncommon and usually treated very successfully with antibiotics.
- **Delayed healing** - Smokers and those with diabetes are more prone to this.
- **Painful/ Tender Scars** - the vast majority of patients complain of some discomfort around the scar and thumb, this is know as pillar pain and generally resolves with time. Rigorous wound care and desensitization as directed by your hand therapist help prevent this.
- **Persistent symptoms** - Occasionally patients’ symptoms don’t improve fully or may worsen.
- **Damage to surrounding structures** - inadvertent damage or stretching to surrounding nerves may cause some numbness around the scars, although this should improve with time.
- **Stiffness** - Operations to the hand cause stiffness; this can be minimized by working closely with your hand therapist.
- **CRPS** - An uncommon but potentially serious complication of hand surgery leading to pain, stiffness, swelling and discomfort. It is impossible to predict this problem but working closely with you hand therapist and getting your hand moving early has been proven to significantly reduce the risk of this.

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When can I get back to normal activities?

The hand MUST be kept clean and dry for 10 days until the sutures are removed. Following your surgery you should be able to return to “desk job” type activities within 1 week of the operation. Any manual work, heavy lifting or sporting activities should be avoided for at least 4-6 weeks. You may return to driving in around 1-2 weeks.

Please inform your insurance company that you have recent hand surgery to ensure that are happy for you to do so.