Acute Services Division





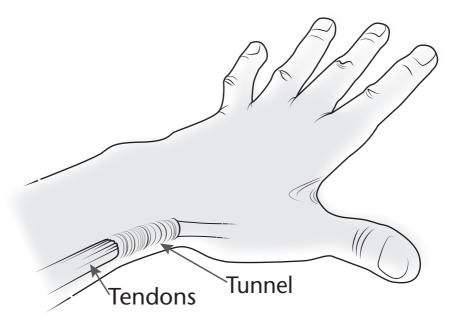
Information About De Quervain's Tenosynovitis



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What is De Quervain's Syndrome?

De Quervain's Syndrome is a condition that affects the tendons where they run through a tunnel on the side of the wrist. De Quervain's is a common, harmless condition but it can be really painful.



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What causes De Quervain's Syndrome?

We don't know exactly why it happens. There is little evidence that it is caused by work activities, but the pain can certainly be aggravated (made worse) by using the hand at work, in the garden, or at sport.

What are the symptoms of De Quervain's Syndrome?

- Pain on the thumb side of the wrist, as shown in the diagram above. Lifting the thumb, as in the hitchhiker position or when using scissors can make the pain worse.
- Tenderness if you press on the tendons
- Swelling around the tendons
- Clicking of the tendons occurs occasionally

What will happen to the pain?

It is likely that the pain will reduce by itself after several months. Here are some "Simple Measures" you can try to control or improve the pain during this time:

- Avoid activities that cause pain
- Use a wrist or thumb splint to stop your thumb moving. This helps the tendons rest
- Painkillers and, or anti-inflammatory medication. A pharmacist or your GP can advise you on this

In most cases De Quervain's settles down in time with help from these simple measures. In rare cases we may offer further treatment.

What are the treatment options?

If rest, simple painkillers and anti-inflammatories, and time have not worked there are two further options:

- A steroid injection improves pain in many cases, though the effect may wear off over time. The risks of the injection are small, but it very occasionally causes some thinning or colour change in the skin at the site of the injection. Improvement may occur within a few days of the injection, but often takes several weeks to be effective. We can repeat the injection if needed but it likely to be less successful each time it's repeated.
- Surgery is the last option. As we know that the pain is likely to settle down with time, we advise trying to manage this condition with non- surgical treatment, rather than having something permanently done. The surgery would involve decompressing the tendon tunnel. It usually takes place in an operating theatre under a local anaesthetic. The surgeon will make an incision (cut) in your skin and widen the tendon tunnel by slitting its roof. The tunnel roof forms again as the split heals, but it is wider, and the tendons have sufficient room to move without pain.

What do I do now?

We do not routinely provide a hospital appointment.

After reading this leaflet if you think that you do not need treatment at the moment you do not need to take any further action. You can get advice from us directly in the future if your symptoms get worse.

Please contact us on the number provided on the covering letter if you wish to discuss further.

