

PROVIDING SPECIALISED TREATMENT FOR

- IMPINGEMENT
- ROTATOR CUFF DISEASE
- INSTABILITY
- FROZEN SHOULDER
- OSTEOARTHRITIS
- POSTURAL DYSFUNCTION
- DISLOCATIONS
- FRACTURES
- CARPAL TUNNEL SYNDROME
- DE QUERVAIN'S TENOSYNOVITIS
- MALLET FINGER
- TENDON INJURIES
- OVERUSE INJURIES
- PLUS GENERAL PHYSIOTHERAPY

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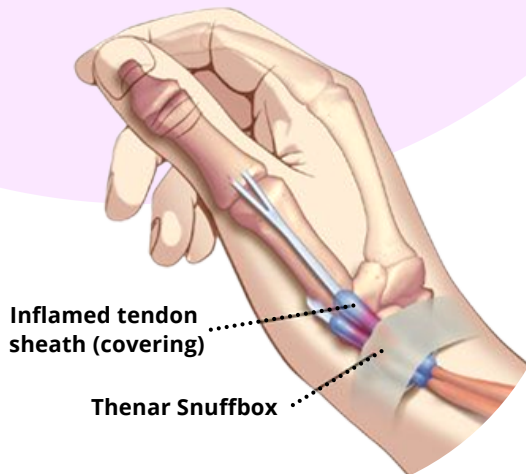
DE QUERVAIN'S TENOSYNOVITIS

Information Brochure

WHAT IS DE QUERVAIN'S TENOSYNOVITIS?

It is a painful disorder affecting two tendons at the base of the thumb, as they travel side by side along the inside edge of the wrist. They pass through a soft tissue channel or sheath, much like the guide on a fishing pole. The inner wall of the channel contains cells that produce a slippery fluid to lubricate the tendons.

With repetitive or excessive movements, the lubrication system may malfunction allowing friction to develop between the tendons of the thumb and the soft tissue sheath. The repetitive friction creates abnormal thickening and constriction of the sheath which interferes with the smooth gliding motion of the tendons.



WHAT CAUSES IT?

Typical causes include stresses such as lifting young children into car seats, lifting heavy grocery bags by the loops and lifting gardening pots into place.

HOW IS IT DIAGNOSED?

Pain over the thumb side of the wrist is the main symptom. However, it can also radiate down the thumb or up the forearm.

As the friction between the two tendons increases, the tendons may actually begin to squeak as they move through the constricted sheath. This is called crepitus.

Your therapist will also perform other special tests which can confirm the diagnosis. Your doctor may also organise an ultrasound to provide added information.

TREATMENT OPTIONS

A special forearm and thumb splint may be recommended which keeps the wrist and lower joints of the thumb from moving. The splint allows the tendons to rest, giving them a chance to begin to heal. This splint will be custom made by your therapist.

Anti-inflammatory medications may also help control the swelling of the tendons and ease symptoms. Ultrasound or laser therapy may provide some benefit, as well as local massage and ice.

If these simple measures fail to control your symptoms, your doctor may suggest an injection of cortisone into the irritated tunnel. Cortisone reduces the swelling of the tendons and may temporarily reduce your symptoms.

As the condition settles, the splint may be taken off to do light pain-free activity, gradually increasing the time period spent out of the splint as tolerated. Stretches for the thumb may also be introduced to ensure good glide of the affected tendons, as well as other conditioning exercises. If therapy does not provide a satisfactory outcome, surgery may be indicated.

