

## Trigger Finger

### Definition

Trigger finger, also known as stenosing tenosynovitis (stuh-NO-sing ten-o-sin-o-VIE-tis), is a condition in which one of your fingers gets stuck in a bent position. Your finger may straighten with a snap — like a trigger being pulled and released.

Trigger finger occurs when inflammation narrows the space within the sheath that surrounds the tendon in the affected finger. If trigger finger is severe, your finger may become locked in a bent position.

People whose work or hobbies require repetitive gripping actions are at higher risk of developing trigger finger. The condition is also more common in women and in anyone with diabetes. Treatment of trigger finger varies depending on the severity.

### Symptoms

Signs and symptoms of trigger finger may progress from mild to severe and include:

- Finger stiffness, particularly in the morning
- A popping or clicking sensation as you move your finger
- Tenderness or a bump (nodule) in the palm at the base of the affected finger
- Finger catching or locking in a bent position, which suddenly pops straight
- Finger locked in a bent position, which you are unable to straighten

Trigger finger more commonly affects your thumb or your middle or ring finger. More than one finger may be affected at a time, and both hands might be involved. Triggering is usually more pronounced in the morning, while firmly grasping an object or when straightening your finger.

### Causes

Tendons are fibrous cords that attach muscle to bone. Each tendon is surrounded by a protective sheath. Trigger finger occurs when the affected finger's tendon sheath becomes irritated and inflamed. This interferes with the normal gliding motion of the tendon through the sheath.

Prolonged irritation of the tendon sheath can produce scarring, thickening and the formation of bumps (nodules) that impede the tendon's motion even more.

## Risk factors

Factors that put you at risk of developing trigger finger include:

- Repeated gripping. Occupations and hobbies that involve repetitive hand use and prolonged gripping may increase your risk of trigger finger.
- Certain health problems. People who have diabetes or rheumatoid arthritis are at higher risk of developing trigger finger.
- Your sex. Trigger finger is more common in women.

## Treatments and drugs

Trigger finger treatment varies depending on its severity and duration.

### Medications

Nonsteroidal anti-inflammatory drugs — such as ibuprofen (Advil, Motrin IB) or naproxen (Aleve) — may relieve the pain but are unlikely to relieve the swelling constricting the tendon sheath or trapping the tendon.

### Therapy

Conservative noninvasive treatments may include:

- Rest. For at least three to four weeks, avoid activities that require repetitive gripping, repeated grasping or the prolonged use of vibrating hand-held machinery.
- Ice or heat. Some people experience improvement by icing the palm several times a day. Others see more benefit with warm-water soaks, particularly first thing in the morning.
- A splint. Your doctor may have you wear a splint at night to keep the affected finger in an extended position for up to six weeks. The splint helps rest the tendon. Splinting also helps prevent you from curling your fingers into a fist while sleeping, which can make it painful to move your fingers in the morning.
- Stretching exercises. Your doctor may also suggest gentle exercises to help maintain mobility in your finger.