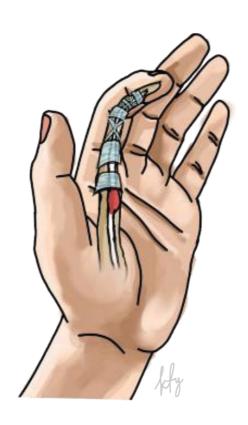


Occupational Therapy for Trigger Finger



WHAT IS TRIGGER FINGER?

Trigger finger is a condition where there is locking or clicking of the affected finger. When you bend your finger, the tendons will slide through a tight tunnel (pulley). If the tendon(s) become inflamed or if the tunnel thickens, the tendon(s) will not be able to slide through the tunnel smoothly. This causes pain, triggering or locking of the finger.

WHAT CAUSES TRIGGER FINGER?

- Engagement in activities that involve excessive and repetitive grasping and wringing
- Prolonged firm contact of the hand while using tools such as screwdrivers and power drills
- Changes in connective tissues that are associated with hormonal changes, rheumatoid arthritis, gout, or diabetes

WHAT ARE THE TREATMENTS AVAILABLE?

Conservative Management

Your doctor may refer you to an occupational therapist for hand therapy to manage your symptoms and improve your ability to perform your daily activities by:

- Educating you on activity modification techniques that encourage rest and recovery of the affected finger
- Fitting you with splint / orthosis to rest the affected finger
- Teaching you exercises that facilitate finger movements

If the pain and symptoms persist after a few months of hand therapy, a corticosteroid injection may be advised by the doctor.

Surgical Management

Surgical release of the tendon sheath may be advised by the doctor if conservative management fails to alleviate symptoms.

ACTIVITY MODIFICATION PRINCIPLES

Modifying the way you use your hands in while carrying out your daily activities may help to reduce pain intensity and prevent future onset of this condition in other fingers.

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You may adopt the following **Activity Modification Principles** to allow rest and recovery at your affected finger.

Scan the QR code to find out more:



Using the activity of floor mopping as an example, you are applying the Activity Modification Principles when you:



REMOVE by engaging others to complete the task

For example: Get assistance from a family member or a robot vacuum to mop the floor



REPLACE by using alternative methods to complete the task

For example: Use a spin bucket to squeeze dry the head of the mop or use disposable wet wipes to clean the floor



REDUCE the frequency, duration and compressive forces when performing tasks

For example: Reduce the number of days that you mop the floor or wrap the mop stick with non-slip mat to cushion the grip



REST by taking regular breaks in between tasks or break tasks up into different parts

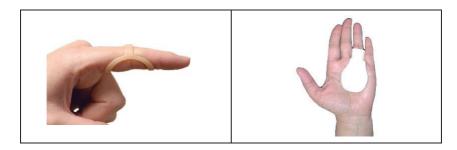
For example: Take short rest breaks after mopping each room

| Pen | down | some | ways | by | whi | ch | you | can | apply | the |
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| that | you ha | ve ider | ntified | earl | ier. | | | | | |

SPLINT / ORTHOSIS WEARING REGIME

The use of a finger splint / orthosis helps to limit your finger movement, which in turn allows the inflamed tendon to rest. This further reduces irritation and the resultant pain.

For the best result, the splint / orthosis should be worn at all times for at least 3 weeks. For more severe cases, your occupational therapist may advise you to wear the splint for a longer duration of between 6 and 8 weeks.



The splint / orthosis can be removed for the following activities:

- Simple self-care activities such as hand hygiene, showering and feeding
- Performing home exercise programme for the affected finger

HOME EXERCISES

Massage

Massage the pulley area for 3 to 5 minutes, 3 to 4 times a day



- Feel for a nodule at the base of your finger
- Massage in a transverse left and right direction

Passive Stretch

- Keep the affected finger relaxed, and use the other hand to gently stretch the fingers
- Do 10 repetitions, hold each stretch for 10 seconds, 3 to 4 times a day



Blocking Exercises

- Perform the exercises within pain-free limit
- Do 10 repetitions, 3 to 4 times a day



 Using the other hand to support the affected finger beneath the first finger joint, slowly bend and straighten the first joint.



2. Use the other hand to support the affected finger beneath the second finger joint, keeping the first joint relaxed, slowly bend and straighten the second joint.

Scan the QR code to find out more:

Home Exercise and Splinting



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This patient information leaflet was jointly created by Occupational Therapy from National University Hospital, Ng Teng Fong General Hospital and Alexandra Hospital.

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