

De Quervains Tenosynovitis

Information for patients from the Hand Therapy Service

You have been diagnosed with De Quervains Tenosynovitis. This leaflet explains the condition and outlines the treatment options available. If after reading this leaflet you have any further questions, please speak to your hand therapist at your next appointment. As well as this booklet please also follow any instructions given to you by your consultant or therapist.

What is De Quervains Tenosynovitis?

De Quervain's Tenosynovitis occurs when the two tendons that run between your thumb and wrist become inflamed (swollen and sore) (see diagram below).

These tendons work to move your thumb away from your hand (Either upwards or out to the side). When you have De Quervain's Tenosynovitis these movements can be uncomfortable.

These tendons pass through a small tunnel as they cross your wrist joint which holds the tendons in the right place. De Quervains Tenosynovitis is caused by thickening of the tissue in this tunnel tightening the space and causing irritation to the tendons as they pass through.



What are the symptoms of De Quervains Tenosynovitis?

- The symptoms can include **pain and tenderness** on the same side of the wrist as your thumb, which are aggravated when you use or move your thumb.
- Other signs can include **swelling** (which can reach your forearm) and a **grating sensation** when you move your thumb.

Because of these symptoms you may not be able to fully move your thumb as normal. You may also find certain tasks that you use your thumb for more difficult, such as gripping or twisting.



What is the cause of De Quervains Tenosynovitis?

- Most often, De Quervains develops as an overuse injury where the tendons are used for repetitive movements, without enough rest in between.
- It may also develop following an impact (injury or accident).
- Over stretching the tendon can also be a cause e.g. when you fall onto your hand and over stretch your wrist over stretching the tendons.
- It can also happen to pregnant women or to women shortly after they give birth.

However, in many cases the cause is unknown.

How long could De Quervains take to recover?

This will vary from one patient to another. Each person/individual will have different causes of their tenosynovitis, experience differing amounts of pain or discomfort, and have different healing times. It is impossible to give a specific time frame for recovery. However, your therapist or consultant may be able to give you an estimate based on your individual situation.

What are the treatment options?

Depending on your clinical presentation, your therapist will assess your condition and develop a treatment plan specifically for you. This may include one or more of the following treatments: If you have any questions about the treatments listed here, please speak to your hand therapist.

1. Rest
2. Ice
3. Splinting
4. Self Massage
5. Graded Exercises
6. Taping Techniques
7. Cortisone/ Steroid Injection
8. Surgery

Advice and tips for activities of daily living: Rest

The key tip is to avoid repeating activities that make your pain worse Your aim is to limit these activities, the best way to achieve this is through rest, but if this is difficult or not possible a splint may be provided to help support your thumb while you do them (see below for more information on splinting). Wherever possible you should avoid aggravating your symptoms, and this, along with your rehabilitation programme, will help your recovery.

Other Tips

- Avoid Repetitive use of the thumb
- Avoid Wringing movements
- Using the splint as recommended by your therapist
- Using both hands to lift objects rather than solely your affected hand/thumb



Ice:

Ice can be used to help ease pain and reduce swelling.

Directions for use: Fill a bag with crushed ice and wrap this ice pack in a thin cloth to protect your skin from injury. Hold the ice over the injured area for 5-15 mins. You should check your skin to look for colour changes and blistering a couple of times during this treatment. . Remove the ice if you feel burning or numbness in the area. This treatment can be completed 3-4 times a day but should not be used within the same hour.

Splinting:

Your therapist may recommend you wear a splint to help manage your symptoms during activities that make your pain worse. Splints will be either off the shelf or custom made, this will be decided by your therapist depending on how bad your pain is. The aim of the splint is to support your thumb and limit movement to rest of your thumb.

Self Massage:

This is a technique you will be demonstrated by your therapist. It will involve using a cream or lotion to lubricate the skin and then using your other hand to massage along the wrist into the thumb.

Exercises:

Below is a selection of exercises that you may be prescribed by your therapist., Please wait for instructions from your therapist before you start any exercises.

These exercises should be completed within your pain levels. We advise you to slow down how quickly you do these exercises, and limit your resistance and the range of exercises you do if your pain gets too bad. Although it is common for you to experience some mild aching when you exercise your irritated thumb. If you experience sharp or prolonged pain, you should stop the exercises and ask your therapist for advice.

Isometrics Exercises (Strengthening without Movement):

For these isometric exercises, the idea is to put tension through tendons without movement, you should be able to feel the muscles working but avoid pain. The aim is to have as much resistance as your thumb can tolerate without pain, to do so you can alter the resistance from the other hand to meet these requirements. A general rule: the more resistance you provide, the more the muscle works, therefore the greater the likelihood of experiencing pain.

1. Keep your thumb in a neutral, relaxed position. Try to lift your thumb up against the fingers of your other hand, resisting the movement. The aim is to hold the thumb in the position in the diagram, hold this for 30-40 seconds, repeat 2 times. Aim to complete alternate days.

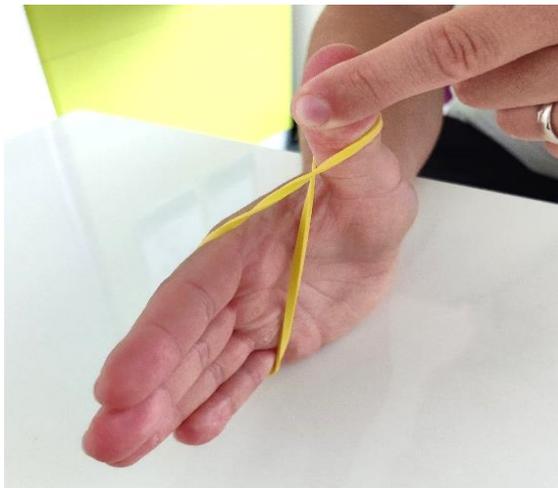


2. Keep your thumb in a neutral position. Try to push your thumb away from your fingers against the resistance of your fingers from the other hand. The aim is to hold the thumb in the position in the diagram, hold this for 30-40 seconds, repeat 2 times. Aim to complete alternate days.

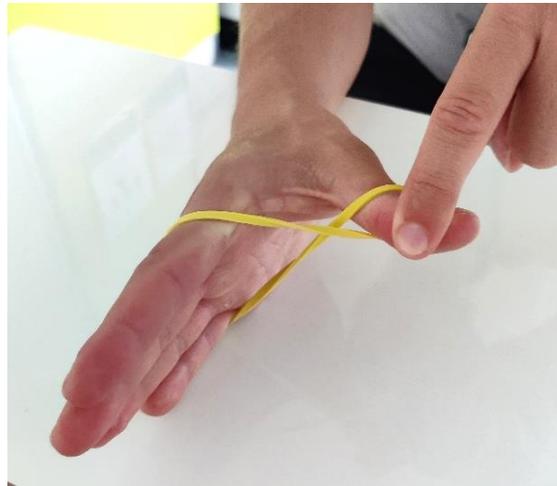


Eccentric with resistance

1. Start by placing your hand on its side on a table or work surface with an elastic band around the thumb and middle finger. (This elastic band should be tight when in position, so that you get a pull when you move your thumb). Using your other hand bring your thumb up into the air, against the resistance, then once you let go slowly lower the thumb back to the starting position controlling the pull of the band. Lowering your thumb should take approx. 3-5 seconds. Complete 5-10 slow reps, aiming to repeat 3 times in total. Aim to complete this every other day.



2. Start by placing your hand on its side on a table or work surface with an elastic band around the thumb and middle finger. Using your other hand bring your thumb out to the side, then once you let go slowly bring the thumb inwards back to the starting position, controlling the pull of the band. The downward phase should last approx. 3-5 seconds. Complete 5-10 slow reps, aiming to repeat 3 times in total. Aim to complete this every other day.



Concentric-Eccentric +/- Resistance

Start by placing your hand on its side on a table or work surface. Have an elastic band wrapped around your thumb and to start with around your middle finger. These exercises should be completed slowly in both directions. To make these harder or easier, you need to increase or decrease the resistance of the band. This can be achieved by wrapping the band around an additional finger or removing a finger from within the elastic band increase or decrease the resistance on the elastic band. If you do not have an elastic band you can provide resistance throughout the movement using your other hand.

1. Bring your thumb up as high as you can and return to the starting position. You should aim to complete 5-10 slow reps, aiming to repeat 3 times in total. Aim to complete this every other day.



2. Bring your thumb out away from the palm and then return to the starting position. You should aim to complete 5-10 slow reps, aiming to repeat 3 times in total. Aim to complete this every other day.



Taping:

Kinesiology tape is the most commonly used tape used alongside treatment of Dequervains tenosynovitis. It can help provide some support to your thumb and help support your irritated tendons when you move them. You will be given demonstrations, information and additional resources by your therapist if it is felt that you could benefit from this treatment. The tape can be brought in sports shops or online.

Steroid Injection / Surgery: If conservative management does not improve symptoms, other options can be explored.

If your Hand Therapy is unsuccessful in treating your De Quervains then you would most likely be referred to the Clinical Assessment team to be assessed for a steroid injection.

What if I have any further queries or concerns?

If you have any questions or concerns regarding your treatment please call the MCH Hand Therapy Service on 03001233444 and ask for your query to be passed to the Hand Therapy team.

Alternatively you can send an email to medway.physiotherapy@nhs.net marking it

