Dequervain’s Tenosynovitis

Also known at DeQuervain’s Tendonitis or DeQuervain’s Disease, is a condition that causes pain and swelling in the thumb and wrist area. You may experience pain with writing, office tasks (such as filing or keyboarding), and lifting objects like books or containers. Also caring for infants, diapering and/or lifting the child, racquet sports or playing an instrument may cause pain.

What causes DeQuervain’s Tenosynovitis?

The tendons which extend the thumb away from the hand become inflamed and irritated. This irritation can be caused by:
1. Fluid retention within the extensor compartment of the wrist.
2. Wear and tear of arthritis or the normal aging process can cause thickening of the tendons which lead to compression of the tendons.
3. Repetitive movements can cause shirring of the tendon lining.
4. Also a direct blow to this area can cause DeQuervain’s Tenosynovitis.

Treatment Options

Depending on the severity of the condition, with the referral of a physician a hand therapist will evaluate your limitations and make recommendations. Treatment may include

1. Conservative management - appropriate splinting of the thumb and wrist along with anti-inflammatory medicine prescribed by your Dr. The therapist may also choose to treat your condition with massage or various modalities such as heat or ice, ultrasound, iontophoresis, or taping to control swelling. The therapist will make suggestions regarding ergonomic modifications or joint protection techniques.
2. The surgeon may choose a steroid injection if conservative treatment is not successful.
3. Surgery may be necessary if pain continues to limit hand function. In this case the procedure involves release of the tendon’s compartment to free up the tendon. The hand therapist will assist in the recovery after surgery. The therapist will develop a plan to assist with post surgical pain, swelling, and wound healing. Range of motion, strengthening and conditioning to return to work will also be addressed.

If you would like more information on DeQuervain’s Tenosynovitis or other hand injuries

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