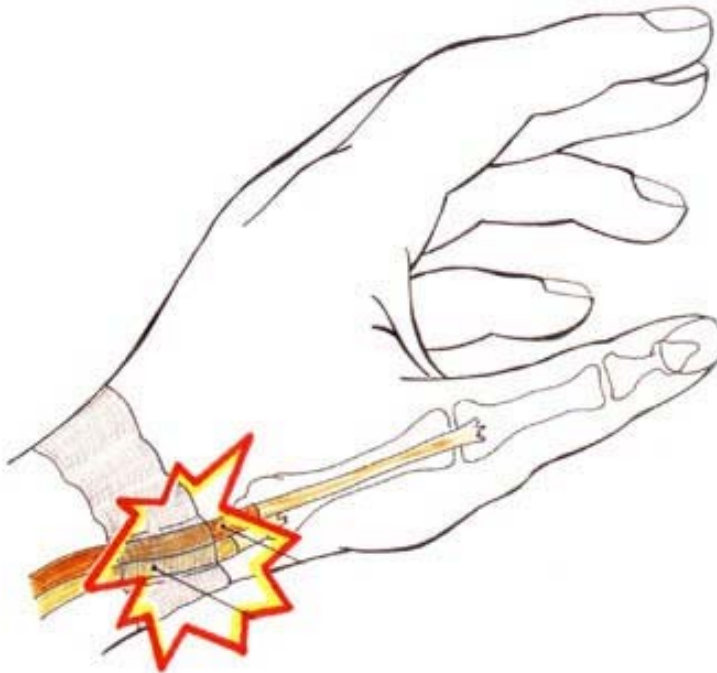




What is it?

DeQuervain's tendinitis is a painful problem which results from irritation of tendons on the side of the wrist which move the thumb sideways away from the palm. It can result in wrist and forearm pain on the side of the thumb, particularly with certain positions and movements of the wrist.



What causes it?

It is most often noticed after unaccustomed activity involving repeated lifting or side-to-side motion of the wrist. It can also develop for no clear reason. The problem is due to irritation of two tendons at a point where they run through a very tight channel ("the first dorsal compartment") from the forearm to the thumb. Many people have two small separate channels for the tendons and are particularly predisposed to this problem.

What can you do to help?

- Avoid wrist positions and activities which are painful, if possible.
- Ice for five to fifteen minutes at a time on the area which is most swollen and tender.
- "Over the counter" non-steroidal anti-inflammatory medication (NSAID), such as aspirin, ibuprofen, naprosyn, or ketoprofen. Check with your pharmacist regarding possible side effects and drug interactions.
- A splint or brace which supports both the wrist and the thumb. A wrist support splint which doesn't support the thumb is not as effective as one that does.
- Wait and watch.

What can a therapist do to help?

- Provide a variety of hand splints to support the thumb and the wrist.
- Help identify aggravating activities and suggest alternative postures.
- Massage, heat, ice and other treatments aimed at making the area more comfortable.

What can a doctor do to help?

- Confirm that this actually is the problem.
- Prescribe stronger NSAID medication or cortisone-type medication.
- Prescribe hand therapy and/or a custom prescription splint.
- Give a cortisone shot into the area of the most irritation.
- Perform surgery to enlarge the tight channel so that the tendons no longer chafe.

How successful is treatment?

- Many people with mild symptoms will improve with a limited period of anti-inflammatory medication and avoiding painful activities, especially if the problem developed during unaccustomed strenuous activities. It is less likely to resolve if it is related to light repetitive work activities.
- A cortisone shot into the sore area helps most people - at least temporarily. When temporary, relief usually lasts about two months. One or two shots provide permanent relief for as many as two out of three people with this problem.

- Surgery helps over four out of five people with this problem, but as many as one out of five will have a new problem after surgery, such as numbness on the back of the hand or tenderness of the scar.

What happens if you have no treatment?

It depends on how much it is bothering you - it really is a quality of life issue. This is not a problem which can spread to other parts of your body or which must be treated within a limited period of time. Some people will have a mild problem which flares up from time to time, and treat it themselves or ignore it, others will have a severe problem which prevents them from doing many things with their hand, and feel that they have no choice but to have surgery.

Appointments

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