

De Quervain Tenosynovitis

Condition: De Quervain Tenosynovitis is a condition that causes the tendons to swell around the base of the thumb, leading to thumb and wrist irritation and pain with movement.

Background: Most experts believe De Quervain Tenosynovitis is caused by overuse of the thumb, however, the exact cause is unknown. It can develop after a thumb injury, repetitive movements that involve the thumb, post-partum (from breast feeding, or repeatedly lifting a car seat), rheumatoid arthritis, and other inflammatory conditions.

Risk Factors: De Quervain Tenosynovitis affects more women than men, particularly middle-aged women and those who have recently given birth. Workers who must forcefully grip items or repetitively grasp with their thumb are also at greater risk. Additionally, certain leisure activities can put people at risk including but not limited to: golfing, gardening and playing racquet sports.

History and Symptoms: Pain and swelling is typically felt along the back of the thumb, up the wrist and into the forearm. It can happen gradually or suddenly, and it is often hard and/or painful to move the thumb. Pinching or grasping items may be difficult, and the thumb may be swollen or hard to move.

Physical Exam: Physicians will inspect for swelling and fullness around the thumb. The physician will perform a physical exam of the area causing pain and discomfort. Using the Finkelstein test, the physician will take the patient's thumb and maneuver it towards the pinky to assess for pain. The physician may also perform the Eichhoff Maneuver where a patient makes a fist, with the thumb resting inside the palm. Next, the physician bends the wrist toward the outside of the hand. If there's pain with either test, it usually indicates De Quervain Tenosynovitis.

Diagnostic Process: The Finkelstein test and Eichhoff maneuver alone are often all that is needed to diagnose De Quervain Tenosynovitis. A physician may obtain blood work or other imaging, such as, an x-ray to ensure there is no other issue.

Rehab Management: A physical medicine and rehabilitation (PM&R) physician, also known as a physiatrist, plays a key role in managing and coordinating the care for patients with this condition. A PM&R physician will help identify the specific activities or positions the patient is using that may be aggravating the problem, and provide modalities such as ice/heat, splinting, and ultrasound therapy to reduce the pain. A corticosteroid injection is one of the best ways to reduce swelling and pain. Other types of medication can be injected including dextrose (called prolotherapy) or platelet rich plasma. Along with injections, a PM&R physician will work with the patient to create an individualized plan for rehabilitation, taking into account the patient's daily activities, work, and recreation. Once the condition is improving, a PM&R physician will prescribe specific exercises to reduce stiffness and improve range of motion and strength, thus reducing further damage and prevent future flares. A PM&R physician's ultimate goal is assisting the patient in being as independent as possible and helping the patient return to their normal daily life.

Other Resources for Patients and Families: Patients and families should recognize that even though only the thumb is affected, the patient may still need significant support. This includes help with basic tasks such as: getting dressed, opening jars and other activities of daily living. In addition, providing social and emotional support can assist with the patient's mental health and ultimate recovery.

Frequently Asked Questions

What is PM&R?

Physical medicine and rehabilitation (PM&R), also known as physiatry, is a primary medical specialty that aims to enhance and restore functional ability and improve quality of life to those with injuries, physical impairments or disabilities affecting the brain, spinal cord, nerves, bones, joints, ligaments, muscles and tendons. PM&R physicians, known as physiatrists, evaluate and treat the whole body, maximize patients' independence in their daily life and are experts in designing comprehensive, patient-centered treatment plans to empower patients to achieve their goals. By taking the whole body into account, they can accurately pin-point problems, decrease pain, assist in recovery from devastating injuries and maximize overall outcomes and performance with non-surgical and peri-surgical options. To learn more, visit www.aapmr.org/aboutpmr.

What makes PM&R physicians unique?

PM&R physicians' training focuses not just on treating medical conditions, but on enhancing the patient's performance and quality of life in the context of those medical conditions. They focus not only on one part of the body, but instead on the development of a comprehensive program for putting the pieces of a person's life back together – medically, socially, emotionally and vocationally – after injury or disease. PM&R physicians make and manage medical diagnoses, design a treatment plan and prescribe the therapies that physical therapists or other allied therapists perform or that are carried out by the patients themselves. By providing an appropriate treatment plan, PM&R physicians help patients stay as active as possible at any age. Their broad medical expertise allows them to treat disabling conditions throughout a person's lifetime.

Why see a PM&R physician?

A PM&R physician will thoroughly assess your condition, needs, and expectations and rule out any serious medical illnesses to develop a treatment plan. By understanding your condition and goals, you and your PM&R physician can develop a treatment plan suited to your unique needs.

How do I find a PM&R physician near me?

Visit www.aapmr.org/findapmrphysician or contact your primary care physician for a referral.

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