

SURGERY Trigger Finger/ Thumb Release

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Trigger Finger/ Thumb Release

What does this involve?

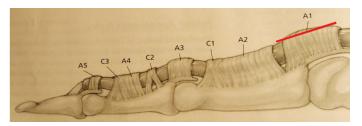
This involves cutting the tight strap (pulley) over the top of the tendons leading to your thumb or fingers.

When is surgery needed?

This operation is performed to relieve persistent irritation of the finger or thumb tendons below the tight strap.

Most patients with this condition find that their symptoms settle with time, rest and steroid injections below the tight strap so only a minority ever need surgery.

Diagram of Trigger Finger Releases



Red line shows the position of the cut strap (pulley) which allows the tendon to run freely underneath it.



Typical incisions for trigger finger/thumb releases.

Type of Operation	Day case
Length of Procedure	15 minutes
Anaesthesia	Local Anaesthetic





What are the main risks of this operation?

Swelling, Stiffness and Scar pain

This can be reduced by keeping the arm elevated and moving the fingers and thumb as soon as possible. Local swelling around the surgical site can persist for several months. Local swelling can be helped by massaging the tissues and this may also improve any irritability in the surgical scar.

Occasionally patients are troubled by more swelling and stiffness than average. In this case complex regional pain syndrome (CRPS) is sometimes the cause (see relevant information sheet in 'Conditions we Treat'). Severe CRPS occurs in less than 1% of cases.

Infection

This is unusual in the hand (less than 1% of cases). Local wound infections can often be treated with oral antibiotics. Rare, deep seated infections may require re-admission to hospital, antibiotics into the vein and occasionally more surgery.

Nerve Damage

There might be a small patch of numbness next to the scar after this surgery.

The nerves to the finger/thumb are close to the strap over the tendon but injury to these nerves is very unlikely if your surgery is undertaken by an experienced hand surgeon.

Residual symptoms

This may occur if the tendons have been damaged by rubbing below the tight strap for a long time. Once the strap is divided the tendons usually gradually recover.

Occasionally a small section of the strap is missed either around or between the tendons and this can mean some symptoms persist. Further surgery might required in this case.

Proximal Interphalangeal Joint Stiffness

If the triggering has been going on for some time the first finger joint (proximal interphalangeal joint) may have become stiff. In this case it is necessary to carry out stretching exercises on this joint after the triggering has been released to regain full straightening of the finger. This will only improve slowly over several weeks.

Post Operative Course

Day 1 and 2

- A sticky dressing and padded bandage is applied after the operation
- · Keep the dressings clean and dry
- · Keep the arm elevated in a sling or on pillows to reduce swelling
- Start moving all the joints immediately after the operation to prevent stiffness
- Take painkillers before the anaesthetic wears off and as necessary thereafter

Day 3 - 14

- You can take off the padded bandage but keep/replace the sticky dressing over the wound to protect it.
- Keep the wound clean and dry
- Continue gently exercising the hand and wrist. You can use the hand for light activities but avoid heavy loading and prolonged periods with the hand dangling down below your waist.

Day 10 - 14

- A wound check and removal of the stitches should occur between 10 and 14 days after your surgery. The details will be arranged on the day of your surgery.
- Continue gradually increasing activities with the hand as comfort allows.
- Once the wound is completely sealed a daily session of 10 minutes massaging the scar with unscented hand cream is often useful to disperse swelling and desensitise the scar.

6 Weeks

 Most people are back to normal activities by this stage although scar massage may still be useful

Post Operative Difficulties

Contact your surgical centre at any stage if:

- Your fingers become more swollen, stiff or painful than you expect
- You see any discharge, wetness or detect any unpleasant smells from below your dressing

Outside normal working hours you may need to attend your local Accident and Emergency Department for help with these issues.

Driving

You may drive when you feel confident to control the car, even in an emergency.

Many patients, particularly if they have had right sided surgery, find they can drive within a week of this operation. Left sided surgery (for the gear stick and hand brake) may take a little longer.

Time off Work

This will vary depending on the nature of your job. A light desk job may only require a few days off work. If you have a very heavy job you may need longer. Discuss your individual case with your surgeon.

Sick notes can be provided on the day of your operation, at your clinic visits and by your own GP.