De Quervain’s disease of the hand

Introduction
This leaflet describes de Quervain’s disease and the symptoms it may cause. It will help you to understand the treatment available to reduce your symptoms.

What is de Quervain’s disease?
This condition results in the sheath covering the tendons at the thumb side of the wrist becoming thickened and painful. The sheath normally acts as a tunnel that holds the tendons in place and enables them to slide up and down freely when the wrist or thumb moves (Diagram 1). When the sheath thickens, the tunnel becomes narrower and it is more difficult for the tendons to slide through. This can result in the tendons becoming inflamed and often results in pain when using the hand.

Diagram 1: Tendons at the thumb side of the wrist

What are the causes?
In many cases this disease can appear without an obvious cause, but sometimes it is caused by gripping for long periods with the wrist bent forwards or to one side. It may also be caused by rapid, repeated movements of the thumb and/or wrist for long periods of time.
Sometimes the onset follows a blow to the outside of the wrist. De Quervain’s disease is most common between the ages of 30 and 55 years, although it can occur at any age. Women are 3 times more likely to be affected than men, particularly those who have a young baby. It is not known whether this is due to hormonal changes as a result of pregnancy and childbirth, or due to lifting and carrying or feeding the baby.

**What are the symptoms?**

Pain is felt at the base of the thumb and side of the wrist. It is usually worse when moving the wrist sideways whilst gripping with the thumb. There may be swelling or a firm lump at the painful spot. Clicking, grating or snapping sounds are sometimes heard or felt with movements of the thumb and wrist.

**How is it diagnosed?**

The diagnosis is usually made based on the symptoms and by simple tests involving movements of the wrist and thumb.

**What is the Treatment?**

- Activities which cause pain should be modified. This may require changing the position of your hand and wrist during work and leisure and taking regular breaks during gripping activities
- Supporting the affected area using a splint, which includes the wrist and thumb, can be helpful. Your hand therapist can provide advice about the most suitable type of splint
- Over-the-counter pain relief and/or anti-inflammatory medication may help to control the symptoms; your pharmacist or GP can advise
- Once the pain has started to settle, exercises to strengthen the muscles around the wrist and thumb should be gradually introduced
- A steroid injection into the tendon sheath may be helpful if other treatments have not been successful. Up to 80% of patients with de Quervain’s disease respond to this treatment. Some patients may require more than 1 injection and up to a maximum of 3 injections may be given in 1 year.
Surgical treatment

In a small number of cases, surgery may be recommended; this is usually only when other treatments have not helped or the problem recurs. The operation may be performed under a local or general anaesthetic and most people go home the same day. The surgeon makes a small incision along the side of the wrist into the sheath to allow the tendons to glide freely.

What happens if I have surgery?

- After the operation, the hand will be wrapped in a bulky bandage or plaster of Paris. You will not be able to use your thumb for gripping for 2 to 4 weeks
- Stitches are usually removed in the hospital outpatient department or in your GP’s surgery, 10 to 14 days following your operation
- You are advised not to drive whilst your dressings/plaster are still in place. Most people feel safe to return to driving 2 to 3 weeks following their surgery
- After the operation, physiotherapy or hand therapy may be helpful to restore the movement and strength in the thumb and wrist, but this is not always required
- Most people return to light work 2 to 3 weeks following surgery; your consultant or therapist will advise about returning to heavier activities.

What are the benefits?

Most patients recover completely following surgery for de Quervain’s disease. Symptoms rarely recur following surgery.

What are the risks?

- The operation can sometimes result in the tendons moving slightly from side to side at wrist level, when the wrist is bent. This does not usually cause any problems but might occasionally require further treatment
- With any operation there is a very small risk of infection. See your GP or inform your consultant if your hand becomes red, painful and swollen after the operation
- The scar may become sore after the operation. This can be managed by massaging the scar regularly with non-scented cream to reduce tenderness
• There is a very small risk of injury to the small nerves at the side of the wrist, resulting in altered sensation or pain over the back of the index finger and the thumb
• Occasionally, persistent pain, stiffness and swelling can occur in the hand. This may be helped by hand therapy.

Contact information

Therapy Department
Cheltenham General Hospital
Tel: 0300 422 3040
Gloucestershire Royal Hospital
Tel: 0300 422 8527 or
Tel: 0300 422 8588

Further information

For further information about tendon injuries in general (including de Quervain’s), please use the following website address:

NHS Choices
Website:
http://www.nhs.uk/Conditions/Tendonitis/Pages/Symptoms.aspx