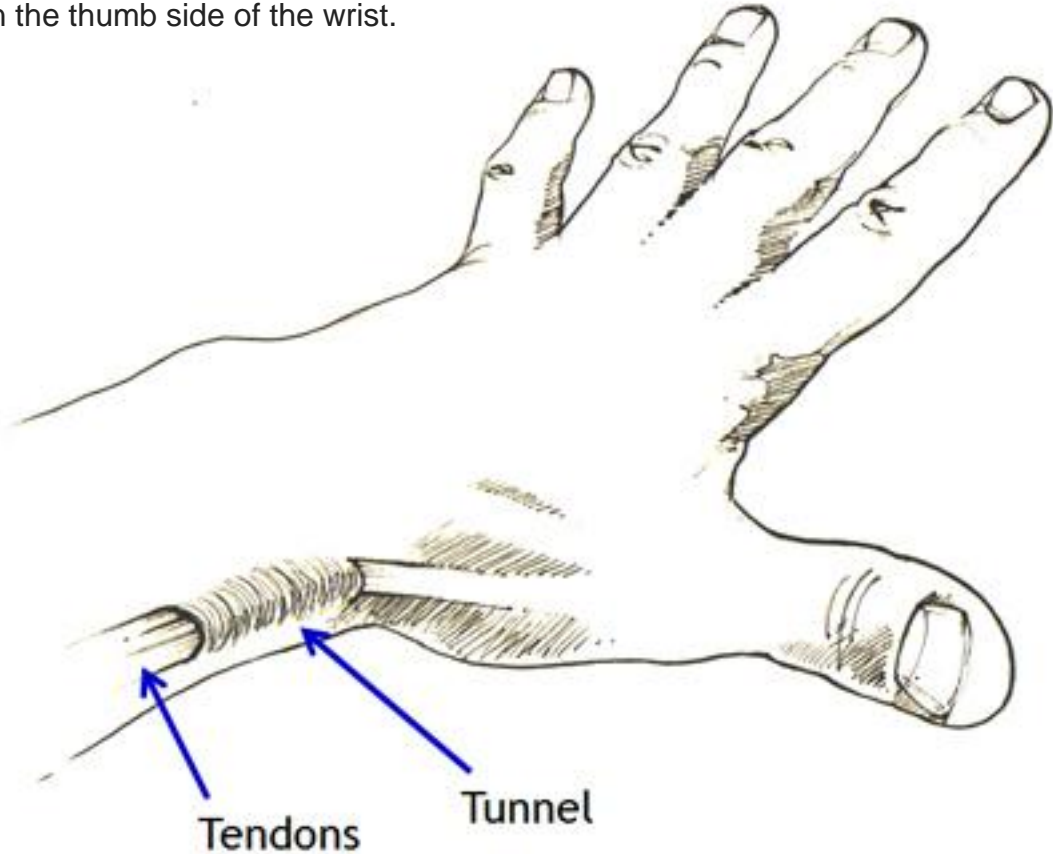


De Quervain's Syndrome Surgery

De Quervain's syndrome is a painful condition that affects tendons where they run through a tunnel on the thumb side of the wrist.



What is the Cause?

It appears without an obvious cause in most cases. New mothers (with small babies) are particularly prone to it, although the reasons for this are unclear. There is little evidence that it is caused by work activities, but the pain can certainly be aggravated by hand use at work, at home, in the garden or in sport.

What are the Symptoms?

- Pain on the thumb side of the wrist, as shown in the diagram. Twisting actions aggravates pain, for example wringing wet cloth and opening jars.
- Tenderness if you press on the site of pain.
- Swelling (and sometimes redness) at the site of pain – compare it with same spot on the opposite wrist.
- Clicking or snapping of the tendons occurs occasionally.

What is the Treatment?

(For more information see our De Quervains Tenosynovitis Information sheet)

Some mild cases recover over a few weeks without treatment.

Treatment options are:

- Avoiding activities that cause pain.
- A splint to immobilize the thumb as well as the wrist.
- Steroid injection significantly helps reduce symptoms in about 70% of cases.
- Surgical release of the ligament that constricts the tendon.

De Quervain's Release (Surgery)

This can be performed as a 'day case' and under a local anesthetic. The surgeon widens the tendon tunnel by opening its roof (see image). The tunnel roof forms again as the split heals, but it is wider and the tendons have sufficient room to move without pain. Pain relief is usually rapid. Nerve branches beneath the skin may need pulling gently to one side to give access to the tunnel, which occasionally causes temporary numbness on the back of the hand or thumb.

Milestones:

- 0-2 days - You will be placed in a bulky dressing, which will allow your thumb to move
- From 2 days to 2 weeks- Wound check and return to work for sedentary / low manual jobs
- From 2 days to 2 weeks - driving dependent on pain levels
- Up to 6 weeks- Return to work for manual jobs
- Up to 6 weeks- Swimming any stroke
- Up to 3 months- Racquet sports

Risks and Consequences

Infection	Affects 1% or 1 in 100 people	This is generally treated with oral antibiotics. Occasionally may need re-admission for I.V. antibiotics or further surgery
Complex regional pain syndrome	Affects 0.2% or 1 in 500 people	Rarely, you may experience pain and stiffness of the hand and arm that is out of proportion to your surgery. This is a serious complication requiring extensive hand therapy and expert pain management. It is not

		unusual to be left with some permanent disability. CRPS can usually be avoided by staying motivated with elevation, movement and scar massage.
Nerve damage		<p>The nerves to the skin will be cut and the area will feel numb for a few weeks and as they return they may feel sensitive. This can be helped with massage.</p> <p>Very rarely the nerves supplying the thumb (superficial radial nerve) may get stuck in scar tissue or get nicked. This may cause an area over the back of the thumb to become numb and will take a while to return. In some cases, further surgery to the injured nerve may be necessary.</p>
Hand stiffness or swelling		Sometimes the hand can become stiff after surgery. This best treated with elevation for the first 24-48 hours and moving the hand and fingers as much as possible straight after the surgery.

Benefits

- **Pain Relief.** This should be gradual over the following weeks, once the initial inflammation following surgery settles down.
- **Weakness.** It generally takes about three months to regain full strength. This can be helped with having some specific strengthening exercises from your hand therapist or physiotherapist.
- **Range of Movement.** You should regain all of your wrist and thumb range of movement following the surgery.