

# De Quervain's

# Syndrome

## Hand Therapy Patient Information

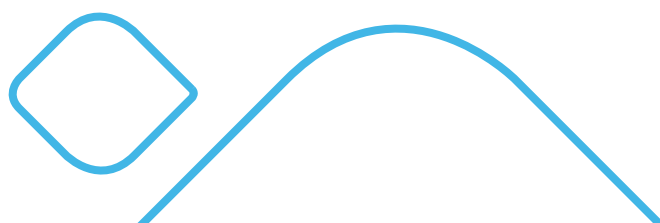
### What is De Quervain's Syndrome and how is it caused?

De Quervain's Syndrome is a common problem resulting in pain associated with thumb movements. Two tendons that help to move the thumb run through a tunnel between the thumb and the wrist, called a sheath. Thickening or narrowing of this sheath restricts the glide of the tendons causing pain and swelling.

The pain can vary from mild, which can spontaneously resolve in a few weeks, to severe, which can take several months and will require some form of intervention to manage the symptoms.

### What are the symptoms?

- Pain on the thumb side of the wrist
- Movements involving the thumb and wrist such as pinching, grasping, gripping or wringing may make symptoms worse
- Swelling around the site of pain which can extend upwards towards the thumb or downwards and across the wrist in comparison to the other wrist
- Tenderness around the site of the pain
- Weakness in pinch or grip



### What is the cause?

In many cases the cause is unknown. Significant anatomical differences exist in the compartment containing these tendons, so symptoms can affect people in varying ways. It is more common during pregnancy, and generally but not exclusively in an active, working population.

Possible triggers are:

- Trauma
- Overuse
- Hormonal changes e.g. during pregnancy
- Spontaneous with no clear cause



### How is it treated?

The options are:

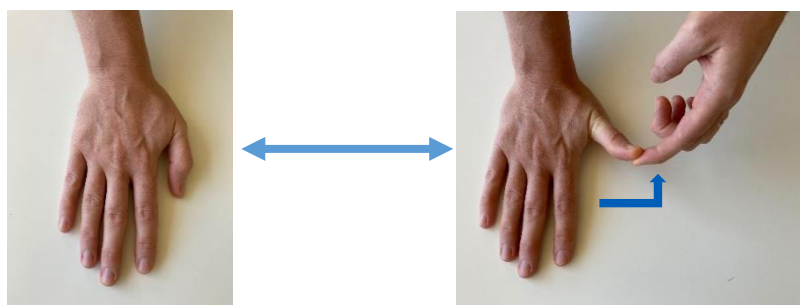
1. **Rest** – Limit the aggravating movements or activities where possible to reduce the pain and allow time for the symptoms to settle.
2. **Pain relief** – Take appropriate analgesia or use topical gels or creams to help reduce the pain.
3. **Splinting** – Use a splint either off the shelf or a custom made one that includes both the thumb and wrist as shown below to allow the thumb to rest.
4. **Hand therapy** – This will involve a rehabilitation programme including advice, education and exercises, which will be individually tailored based on your symptoms.
5. **Steroid injection** – If hand therapy does not resolve your symptoms, an injection may be appropriate, but this will be discussed by your GP or therapist.
6. **Surgery** – If your symptoms persist despite the above-mentioned treatments then surgery may be an option but is only advised for individuals with severe pain and dysfunction.



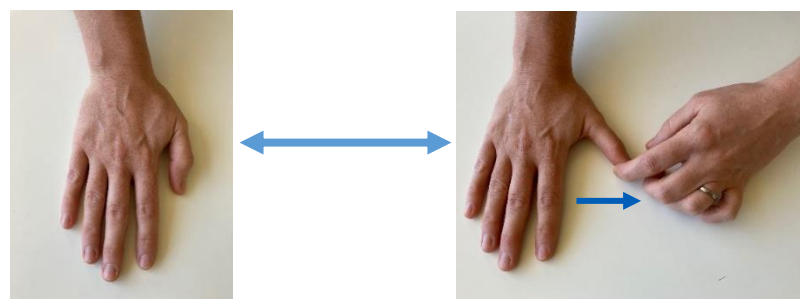
## Exercises

- If you have been instructed to wear a splint, then remove this for the exercises.
- **Do not** exercise into pain.
- Your therapist will guide you on which exercises to complete and when to progress the exercises.

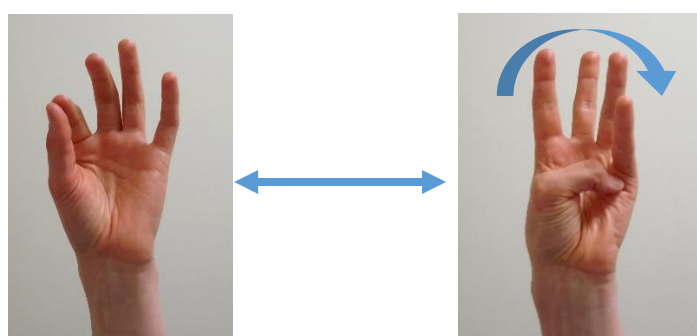
1. Start with your hand flat on the table. Using your unaffected hand lift your thumb up and away from your index finger. Then slowly lower it back down towards your index finger. Do this 10 times.



2. Start with your hand flat on the table. Using your unaffected hand move your thumb away from your index finger. Then actively move your affected thumb back to the start position. Do this 10 times.



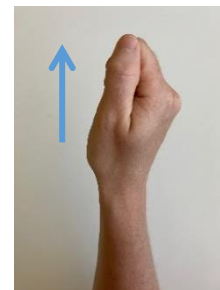
3. Gently glide your thumb across the tips of each finger, towards the bottom of the little finger. You should only work as far as is comfortable. Do this 10 times.



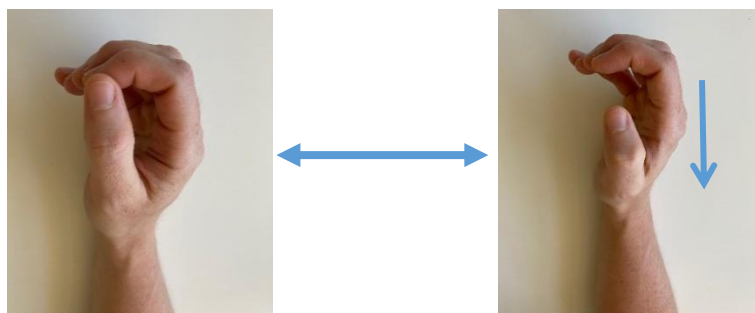
### Progression Exercises

- If you managed the previous exercises and your symptoms are improving, your therapist may advise you to move onto the following exercises.
- **Do not** exercise into pain.

4. With your elbow resting on a stable surface and your wrist in a neutral position, gently drop your wrist down towards your little finger into discomfort. Then return to the start position. Do this 10 times.



5. With your forearm resting on the table. Place the tip of your thumb on your index finger and gently draw your thumb backwards towards your wrist. Keep your fingers relaxed. Do this 10 times.



6. Place your hand and forearm on a stable surface and relax your wrist and hand. Using the index finger and middle finger off your unaffected hand, gently rub up and down the thumb side of your wrist for 1 minute so that area in question starts to feel warm. Do this little and often throughout the day.



## Rehab tips for your hand and wrist

### 1. Warm water exercises

Submerge the affected hand/arm in warm water for up to 5mins and practice the exercises taught by your therapist.

### 2. Sensory exercises

If you develop hypersensitivity, sensory exercise will help settle this:

- Use different textures/materials to rub over the areas that are sensitive for 2-3mins each. Aim to use 4-6 different textures per day.
- Using a bowl of dry rice, spend 10mins gently raking/grasping/swirling the rice and working it between your fingers.

3. If a splint is provided, wear it as directed by your therapist. You may need to wear it for a minimum of 3 weeks or as long as 3 months, depending on the severity of your symptoms.

4. Your therapist may discuss taping to help ease your symptoms. If this is indicated, they will teach you how to do this.

**If you have any problems, please contact your therapist. Contact details are below.**

#### Hand Therapy

Brownsword Therapies Centre (Dept F1)  
Royal United Hospitals Bath NHS Foundation Trust  
Combe Park, Bath, BA1 3NG  
01225 821241 | [www.ruh.nhs.uk](http://www.ruh.nhs.uk)

Please contact the Patient Support and Complaints Team (PSCT) if you require this leaflet in a different format or would like to feedback your experience of the hospital.

Email [ruh-tr.psct@nhs.net](mailto:ruh-tr.psct@nhs.net) or telephone 01225 825656.

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