De Quervain's Tenosynovitis

People experiencing pain in the thumb and wrist may be suffering from De Quervain's tenosynovitis (Mommy thumb). This condition is caused by a problem with the tendons that connect the forearm muscles to the thumb. These tendons and the covering around them get inflamed, causing symptoms.





De Quervain's tenosynovitis is a painful condition affecting the tendons on the thumb side of the wrist. The condition generally manifests through repetitive stress on these tendons causing inflammation and swelling, which in turn leads to pain when raising the thumb or bending the wrist. Common causes of the repetitive stress include:

- Frequent and repeated movement of the thumb and wrist, for example, using mobile gadgets or computers to type messages
- Not keeping the wrist in a neutral (straight) position when moving or using your thumb
- Overuse of the forearm and thumb muscles, for example, repetitively squeezing a racket hard

It is commonly seen in housewives, computer users, and racket sports players. The increased use of mobile gadgets also makes people more prone to suffer from pain in the thumb and wrist.

Many pregnant ladies are at a higher risk of suffering from de Quervain's tenosynovitis due to hormonal changes, which cause tendons and ligaments to become more lax. For them, the recovery period is also longer as the ladies may need to wait till the hormone levels return to normal after pregnancy.

Signs and symptoms

Below are some of the symptoms:

- · Pain in the wrist or thumb
- · Trouble gripping objects
- Swelling in the wrist
- Stretchy feeling and tightness over the forearm muscles
- · Cracking sound when moving the thumb

Treatment options

Conservative treatments by physiotherapists can be a first line management to treat the symptoms in different stages.

For the acute phase, pain relief is the main goal.

For the **sub-acute phase**, when the pain has been managed, stretching and gentle mobilization can be helpful.

For the **recovery phase**, strengthening exercises for the muscles is suitable. Usually de Quervain's tenosynovitis can be managed well with physiotherapy treatments, and the expected recovery duration is about six to eight weeks for soft tissues healing.

1) Physiotherapy Treatments:

· Acute phase

Pain, swelling, and redness at the hand are the common symptoms in the inflammation stage. Physiotherapy treatments aim to reduce the inflammation and improve the circulation around the tendons, for example, ice therapy, acupuncture, ultrasound and microcurrent therapy (a form of electrical stimulation). It is also important to let the hand region rest. People suffering from acute pain should also avoid carrying weight and any squeezing motions. Meanwhile, a wrist and thumb brace or support for stabilization can keep the thumb and wrist in a proper position at all times.



· Sub-acute phase

Pain relief is still necessary at this stage. In addition, patients can begin gentle massage on the tendons and muscles. Stretching is also beneficial to maintain the range of movement of the thumb and the flexibility of the soft tissues.

The following exercises in the sub-acute phase.

A) Active exercise for the thumb





Move the thumb up and down, and repeat 10 times





Move the thumb in and out horizontally and repeat 10 times *B) Stretching the thumb tendons*





Bend the thumb and hold with other fingers. Bend the wrist gently for stretching. Hold for 10-15 seconds. **Repeat 3 times**.

Recovery phase

When the pain level becomes stable, patients can start strengthening exercises of the thumb and wrist muscles to build more support.

A) Squeezing exercises with a soft ball



B) Thumb extension resistance exercise



C) Strengthening of forearm muscles with a dumbbell





Hold a light weight (2-3 lbs) with the palm down and move the wrist up





Hold a light weight (2-3 lbs) with the palm up, move the wrist up

If the pain cannot be controlled fully with physiotherapy treatments, medication or injection may give quick relief to control the pain and inflammation.

2) Drug management:

Non–steroidal anti-inflammatory drugs (NSAID) or other painkillers can be used to control the early stage of inflammation. If the pain and inflammation are not controlled well with oral drugs, the doctor may suggest a local steroid injection to the inflamed tendons.

3) Surgical intervention

If the pain does not respond well to physiotherapy, medication and injection, the doctor may recommend a "tendolysis" surgical intervention to release the tendon from adhesions and let the tendons glide smoothly.

Preventive care and measures

- Avoid prolonged repetitive stress on the thumb and wrist, for example, squeezing a towel, using a computer mouse or gripping objects tightly between the thumb and fingers
- Keep the wrist in a neutral position. Rest and perform stretching exercises between work
- Carers of babies should support the baby with the whole palm instead of only using the crook of the hand





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To make a physiotherapy appointment, please call **2849 0760** or email **physio@matilda.org**.

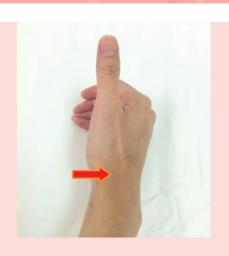
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拇指腱鞘炎

拇指腱鞘炎,又稱為媽媽手,令患者的拇指和手腕痛楚,這是由於連接前臂肌肉至拇指的肌腱與 周邊組織發炎所造成。





拇指腱鞘炎是一種出現在拇指至手腕部位肌腱的痛症,一般是由 於該部位的肌腱受到勞損,導致發炎及腫脹,令活動拇指和屈曲 手腕時出現痛楚。常見的勞損情況包括:

- · 持續重複活動拇指和手腕,例如使用手提通訊裝置或電腦
- · 活動拇指時,手腕沒有保持自然(伸直)的姿勢
- 過度使用前臂和拇指的肌肉,如長時間緊握球拍

此症亦常見於家庭主婦、電腦使用者及使用球拍的運動員。經常 使用手提通訊裝置的人士亦會增加患上拇指和手腕相關痛症的 風險。

不少婦女在懷孕期間因荷爾蒙出現變化,令肌腱及韌帶變鬆,因此患上拇指腱鞘炎的機會也較高。孕婦若患有媽媽手,或須待產後荷爾蒙水平恢復正常方能痊癒,因此她們的康復期或較長。

症狀

部分症狀包括:

- · 手腕或拇指疼痛
- 難以緊握物件
- 手腕腫脹
- 前臂肌肉感到拉扯或繃緊
- · 拇指活動時格格作響

治療方法

物理治療師提供的保守治療,可初步應付不同時期出現的徵狀。

急性期:鎮痛乃治療的主要目標。

亞急性期(當痛楚減輕):可進行一些伸展動作及簡單手部運動, 改善發炎情況。

復康期:可進行肌肉強化運動。一般而言,接受物理治療後,拇指腱鞘炎患者的發炎情況會受到控制。有關肌腱的軟組織要完全修復,預計約需六至八星期。

1) 物理治療:

・急性期

肌腱發炎時,患者會感到手部疼痛和紅腫。物理治療包括冰敷、針灸、超聲波及微電流治療(一種電流觸擊),旨在減輕肌腱的發炎程度,並改善周邊的血液流通。此外,手部有足夠休息亦十分重要。當肌腱劇痛時,患者應避免提取重物或緊握物件。患者也可考慮配帶護腕,把拇指和手腕固定在適合的位置。



・亞急性期

在亞急性期,為發炎位置鎮痛仍然十分重要。患者可輕輕按摩 手部肌腱和肌肉。伸展運動有助保持拇指的活動幅度和軟組織 的靈活度。 患者可參考以下步驟,在亞急性期進行練習。

A) 拇指伸展運動





拇指上下擺動,重複十次





拇指內外開合,重複十次

B) 拇指肌腱伸展





拇指握在拳頭內,手腕輕輕向前方伸展,維持十至十五秒, 重複三次。

復康期

待疼痛情況穩定後,患者可嘗試訓練拇指和手腕肌肉,加強其 活動能力。

A) 緊握軟膠球



B) 拇指拉力練習



C) 透過舉啞鈴強化前臂肌肉





手掌向下,手握輕量啞鈴(2-3磅),手腕向上提舉。





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若物理治療未能紓緩痛症,患者可考慮服用或注射藥物。這些藥 物的止痛效果較快,且能控制痛楚及炎症。

2) 藥物:

非類固醇消炎藥和其他止痛藥均適用於治療初期的炎症。若口 服藥物未能有效控制痛楚,醫生或會建議在發炎的肌腱局部注 射類固醇。

3) 手術:

如進行物理治療、服食藥物和注射藥物後,情況仍未好轉,醫 生或會建議患者接受腱鞘鬆解手術,將黏連的肌腱分開,讓肌 腱重新在腱鞘內順暢滑動。

日常護理及預防方法

- · 避免拇指和手腕重複做同一動作,如時常扭毛巾、使用滑鼠或 利用手指和拇指抓緊物件,以免受壓。
- 讓手腕自然擺放。工作之間宜能適度休息和伸展運動。
- · 抱起嬰兒時,應以整個手掌承托嬰兒,避免把重量卸在拇指與 食指間的虎口位置。





撰寫: 明德國際醫院物理治療部

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