De Quervain’s

About your condition

What is de Quervain’s?

De Quervain’s tendonitis (tendonitis of the first dorsal compartment) is a condition brought on by irritation or inflammation of the wrist tendons at the base of the thumb. The inflammation causes the compartment around the tendon to swell and enlarge, making thumb and wrist movements painful. Making a fist, grasping, or holding objects becomes painful.

What causes it?

The cause of de Quervain’s is an irritation of the tendons at the base of the thumb, usually caused by taking up new, repetitive activity. New mothers are especially prone to this type of tendonitis due to hormonal fluctuations associated with pregnancy and the awkward handling and positioning required during nursing. Wrist fractures can also predispose a patient to de Quervain’s, due to the increased stresses across the tendons.

What are the signs and symptoms?

Pain over the thumb-side of the wrist is the main symptom. The pain may appear either gradually or suddenly and is located at the first dorsal compartments at the wrist. Pain may radiate down the thumb or up the forearm. Hand and thumb motion increases pain, especially forceful grasping or twisting. Swelling over the base of the thumb may include a fluid-filled cyst in the region. Because of the pain and swelling, motion such as pinching may be difficult, and irritation of the nerve lying on top of the tendon sheath may cause numbness on the back of the thumb and index finger.

How is it diagnosed?

Tenderness directly over the tendon on the thumb-side of the wrist is the most common finding. A test is done where the patient makes a fist with the fingers wrapped over the thumb. The wrist is then bent in the direction of the little finger. This motion can be quite painful for the person with de Quervain’s tendonitis.
Treatment Options

Non-surgical treatment

We may recommend resting the thumb by wearing a splint. Anti-inflammatory medicines may be recommended. A steroid injection into the first dorsal compartment may be an option.

These non-operative treatments help to reduce the swelling, which typically relieves pain over time. In some cases, stopping the aggravating activities may allow the symptoms to go away on their own.

Surgical treatment

If symptoms do not improve, surgery may be recommended. The surgery is an outpatient procedure that opens the compartment to make more room for the inflamed tendons to glide freely.

Care After Surgery

At your clinic visit 2 weeks after surgery, the stitches will be removed. Physical therapy may be suggested. Normal use of the hand can usually be resumed once comfort and strength have returned.

To learn more about de Quervain’s, visit www.orthop.washington.edu.